II. MORBIDITY

A. INFECTIOUS DISEASES

Background

Vaccines are among the most effective and reliable of medicines for people of all ages. Every year, they prevent countless serious illnesses and thousands of possible deaths. About 100 million vaccine doses are given annually in the United States, most of them to infants and children as part of their routine immunization schedule. A single dose of some vaccines gives nearly complete protection. With others, a series of doses spread over months or years is needed for the best results.

Children in particular are beneficiaries of the protection from illness that vaccines offer. Currently, there are ten diseases from which children are routinely protected through the use of standard childhood immunizations. These diseases are: diphtheria, tetanus, pertussis (whooping cough), polio, measles, mumps, rubella (German measles), hepatitis B, Haemophilus influenzae B (bacterial meningitis), and varicella (chicken pox). Enormous reductions have been seen in each of these serious diseases since the introduction of vaccines. For example, there were 894,134 cases of measles reported in the United States in 1941, but only 85 cases in 1999. Louisiana had no reported cases of measles in 1999.

Although the public is most familiar with the vaccines used for childhood immunization, there are many others that afford protection to individuals at risk of infection from other types of exposures. An example is the hepatitis A vaccine, which recently has become available to select populations, such as travelers to areas where the disease is endemic.

In addition to being reliable and effective, vaccines are also one of the most cost-effective medical procedures available. The ten vaccine-preventable diseases addressed in standard childhood immunizations are very serious illnesses and very expensive to treat. Vaccines are relatively inexpensive and very effective. Cost estimates show that each dollar spent on immunization saves $10-$12 in direct medical and hospitalization costs. These estimates do not include attendant costs, such as workdays lost by family members, costs for outbreak control, or the burden of lives lost to these severe diseases. A prime example is measles, which leads to the hospitalization of approximately 10% of those who become ill. Even with excellent medical care, approximately 1 out of every 1,000 cases dies, usually from measles infection of the lungs and of the brain.

The diseases that are prevented by routine childhood immunizations have not disappeared. Pertussis is spread by direct contact, such as coughing, to others who are not immune. As a result of childhood immunization, Louisiana reported only 10 cases of pertussis in 1999. In countries where childhood immunization against pertussis has been halted, there have been large outbreaks of whooping cough. Diphtheria, another dangerous infection, which has been controlled through childhood immunization, has not been seen in Louisiana since 1972. However, in recent years, an epidemic of diphtheria occurred in Eastern Europe and Asia. Without immunization, re-introduction of diphtheria and other vaccine-preventable diseases into Louisiana via an infected person can contribute to an increase in the number of cases with subsequent development in clusters and outbreaks.

1999 Status

Hepatitis A (HAV) is a viral disease that affects the liver. The number of hepatitis A cases reported in 1999 increased by 23% from 1998. Louisiana's case rate was approximately half of the national case rate (4.9 vs. 8.6 per 100,000). Sex-race specific rates per 100,000 were highest among Caucasian males (5.1) followed by Caucasian females (4.3). Rates by age groups were highest among two different age groups: 35-44 years (36/100,000) and 25-34 years (34/100,000).

Approximately half of the 213 cases statewide reported risk factor information. Of these case reports, 13% were reported in children attending day care; 15% were contacts of a known hepatitis A case, and 21% reported exposure other than sexual or household contact. Parishes reporting the highest case rates per 100,000 include: Vermilion (132), West Feliciana (70) and Jefferson Davis (42)

Hepatitis B (HBV) is a serious public health problem that affects people of all ages in the United States and around the world. Each year an estimated 300,000 people become infected with the hepatitis B virus in the United States. The disease is caused by a virus that attacks the liver. A person can get hepatitis B by direct contact with the blood or body fluids of an infected person. A baby can get hepatitis B from an infected mother during childbirth. Symptoms of hepatitis B include yellowing of the skin or eyes, loss of appetite, nausea, vomiting, fever, extreme tiredness, or stomach pain.

The most effective means of preventing hepatitis B infection is to be immunized with the hepatitis B vaccine. Research is also being carried out on drugs that have the potential for improving treatment of chronic hepatitis.

In 1999, hepatitis B case reports decreased by 22% from 1998. Sex-specific rates continue to be higher for males than females (4.6 vs. 3.4 per 100,000). Race-specific rates were almost two times higher for African-Americans than for Caucasians (5.0 vs. 2.3 per 100,000). The 35-44 age group accounted for 32% of all reported cases. Of the 172 cases reported, 24% reported IV drug use during the six weeks to six months prior to illness; 16% reported receiving one or more tattoos. Of those reporting number of sexual partners in the six months prior to infection, 33% had greater than two sexual partners. Of the cases reporting a sexual preference, 84% were heterosexual. Parishes reporting the highest case rates per 100,000 included: Washington (14), St. Helena and Caldwell (10 each).

Hepatitis C is a viral disease that causes liver inflammation and can lead to cirrhosis and cancer of the liver. It is a disease of growing magnitude in the United States: an estimated 3.9 million (1.8%) Americans have been infected with HCV, of whom 2.7 million are chronically infected. There are approximately 36,000 new infections diagnosed in the United States each year, of which 25-30% are symptomatic. Symptoms of hepatitis C are often non-specific, but may include jaundice, fatigue, abdominal pain, loss of appetite, intermittent nausea, and vomiting. Persons at increased risk of contracting hepatitis C include injecting drug users, sex contacts of infected persons, persons with multiple sex partners, recipients of blood transfusions before July 1992, health care workers exposed to blood, and infants born to infected women.

While there is no vaccine available to prevent hepatitis C, antiviral drugs such as interferon used alone or in combination with ribavirin, are approved for the treatment of persons with chronic hepatitis C.

In 1999, 302 (7.0 per 100,000) cases of acute hepatitis C were reported, a 55% increase from 1998. The case rate is higher than the 1998 national case rate of 1.3 per 100,000, but lower than the Healthy People 2000 target rate of 13.7 per 100,000. Sex-specific rates were highest among males (9.4 per 100,000) than females (4.7 per 100,000). Of all reported cases, 42% were between the ages of 35 and 44. Parishes reporting the highest case rates per 100,000 include: Calcasieu (32), Beauregard (17), E. Feliciana and Washington (16 each), and Evangeline, Bossier and St. Bernard (15 each).

Pertussis (whooping cough) is a respiratory illness that can affect all age groups, but mostly is found in infants and young children. It is caused by a bacterium called *Bordetella pertussis*. These bacteria are present in the mouths and noses of infected people. Pertussis symptoms

are the usual cold symptoms, which then develop into coughing fits with a high-pitched "whooping" sound. Pertussis can be fatal in infants.

Immunization against pertussis involves five doses of the DTaP (diphtheria, tetanus, and acellular pertussis) combination vaccination starting at age two months.

There were 10 cases reported in 1999, which is a decrease of 23% from 1998 and is the lowest reported total since 1981. Cases continue to cluster by age, with 90% of all reported cases under five years of age and no reported cases over nine years of age. Sixty percent of the cases were female. Of the 4 cases reporting vaccine histories, 2 cases had no DTP doses prior to the onset of illness, and 2 cases had at least one dose.

Mumps is a viral respiratory disease that causes swelling and pain of salivary glands in the face and neck. Mumps is spread by contact with infected people. This disease is contagious from one to two days before and until seven days after symptoms appear. It is most infectious when the swelling starts. The symptoms are fever, pain in front of the ears that increases during chewing, and swollen glands in the cheeks and sometimes under the jaw. It is most likely to affect children ages five to nine, but may occur at any age. It is likely to be more serious and painful in teenagers and adults.

Immunization against mumps involves two doses of MMR (measles, mumps and rubella) vaccine, usually at age twelve months and at four to six years.

In 1999, 11 cases of mumps were reported, an increase of 2 cases from 1998. Six cases were male; 70% were less than 15 years of age. Cases were distributed throughout Louisiana with no parish reporting more than two cases. Region VII (the Shreveport area) and Region IX (the Northshore area) each reported 3 cases. Vaccine histories of these cases were not reported.

Selected Infectious Diseases Counts
Louisiana, 1995-1999

	1995	*1996*	*1997*	*1998*	*1999*
Hepatitis A	196	261	266	173	213
Hepatitis B	244	209	208	219	172
Pertussis	22	15	22	13	10
Mumps	15	24	18	9	11

Source: Louisiana Office of Public Health, Infectious Disease Epidemiology Program

Selected Infectious Diseases Counts by Parish Louisiana, 1999							
Parish	**Hepatitis A**	**Hepatitis B**	**Measles**	**Mumps**	**Pertussis**	**Rubella**	**Total**
Louisiana	213	172	0	11	10	0	406
Acadia	12	2	0	0	0	0	14
Allen	0	2	0	0	0	0	2
Ascension	1	2	0	0	0	0	3
Assumption	0	0	0	0	0	0	0
Avoyelles	1	3	0	0	0	0	4
Beauregard	3	0	0	0	0	0	3
Bienville	0	1	0	0	0	0	1
Bossier	1	6	0	0	0	0	7
Caddo	7	12	0	2	2	0	23
Calcasieu	4	10	0	1	0	0	15
Caldwell	0	1	0	0	0	0	1
Cameron	0	0	0	0	0	0	0
Catahoula	0	1	0	0	0	0	1
Claiborne	2	0	0	0	0	0	2
Concordia	1	0	0	0	0	0	1
DeSoto	0	0	0	1	1	0	2
East Baton Rouge	9	25	0	1	0	0	35
E. Carroll	0	0	0	0	0	0	0
East Feliciana	2	0	0	0	0	0	2
Evangeline	2	0	0	0	0	0	2
Franklin	0	0	0	0	0	0	0
Grant	1	1	0	0	0	0	2
Iberia	2	4	0	0	0	0	6
Iberville	5	1	0	0	0	0	6
Jackson	1	0	0	0	0	0	1
Jefferson	9	12	0	1	2	0	24
Jefferson Davis	13	1	0	0	0	0	14
Lafayette	5	2	0	0	0	0	7
Lafourche	0	2	0	0	0	0	2
Lasalle	0	0	0	0	0	0	0
Lincoln	2	0	0	0	0	0	2
Livingston	4	2	0	0	0	0	6
Madison	0	0	0	0	0	0	0
Morehouse	0	1	0	0	0	0	1
Natchitoches	1	0	0	0	0	0	1
Orleans	17	39	0	0	1	0	57
Ouachita	6	7	0	1	0	0	14
Plaquemines	0	2	0	0	1	0	3
Pointe Coupee	0	1	0	0	0	0	1
Rapides	3	6	0	1	0	0	10
Red River	0	0	0	0	0	0	0
Richland	0	0	0	0	0	0	0
Sabine	1	0	0	0	0	0	1
St. Bernard	2	3	0	1	0	0	6

Selected Infectious Diseases Counts by Parish Louisiana, 1999							
Parish	**Hepatitis A**	**Hepatitis B**	**Measles**	**Mumps**	**Pertussis**	**Rubella**	**Total**
St. Charles	0	0	0	0	0	0	0
St. Helena	0	1	0	0	0	0	1
St. James	1	0	0	0	0	0	1
St. John the Baptist	0	0	0	0	0	0	0
St. Landry	0	5	0	0	0	0	5
St. Martin	0	1	0	0	0	0	1
St. Mary	0	1	0	0	1	0	2
St. Tammany	14	1	0	2	0	0	17
Tangipahoa	0	3	0	1	0	0	4
Tensas	0	0	0	0	0	0	0
Terrebonne	1	2	0	0	0	0	3
Union	0	0	0	0	0	0	0
Vermilion	66	2	0	0	0	0	68
Vernon	3	0	0	0	0	0	3
Washington	1	6	0	0	0	0	7
Webster	1	0	0	0	2	0	3
W. Baton Rouge	0	0	0	0	0	0	0
West Carroll	0	0	0	0	0	0	0
West Feliciana	9	1	0	0	0	0	10
Winn	0	0	0	0	0	0	0

Source: Louisiana Office of Public Health, Infectious Disease Epidemiology Program

B. TUBERCULOSIS

Background

Pulmonary Tuberculosis (TB) results from infection with an organism named Mycobacterium tuberculosis. Persons with TB may transmit the organism by coughing. If untreated, the pulmonary TB case may infect others who breathe in the organisms expelled by the infected person. Infection is not limited to the lungs; it can also occur in other regions of the body.

Due to the danger of contagion, individuals who have been exposed to TB should be identified and evaluated. A simple skin test is used to determine if the exposed person has been infected. If the skin test and evaluation reveal that the person has been infected, a course of preventive therapy may be prescribed to protect against progression from TB infection to TB disease. Preventive therapy generally consists of six months of therapy with a single anti-TB drug called isoniazid, or INH.

Treatment of TB disease requires an initial course of four anti-tuberculosis drugs. Length of treatment for TB disease is usually six months, but may vary due to the severity of illness or the presence of other factors, such as HIV. Due to the potentially great public health impact of this infectious disease, and because of the intricacy of the therapy (i.e. length of treatment and number of medications involved), a practice called Directly Observed Therapy (DOT) is employed to assist the patient with his or her therapy and assure completion. With DOT, trained field staff or medical personnel monitor the efficacy of treatment and the patient's compliance with the treatment regimen.

2000 Status

Louisiana reported 331 cases of TB in 2000, for a case rate of 7.4 per 100,000 people. This represents a 7.3% decrease from the 1999 figure of 357 cases (8.2 per 100,000) and a 12.9% decrease since the 1998 report of 380 cases (8.7 per 100,000). Caution should be urged however; decreases over such a short period do not necessarily reflect a trend in tuberculosis control.

Tuberculosis Cases
Louisiana, 1996-2000

1996	*1997*	*1998*	*1999*	*2000*
420	406	380	357	331

Source: Louisiana Office of Public Health , Tuberculosis Program

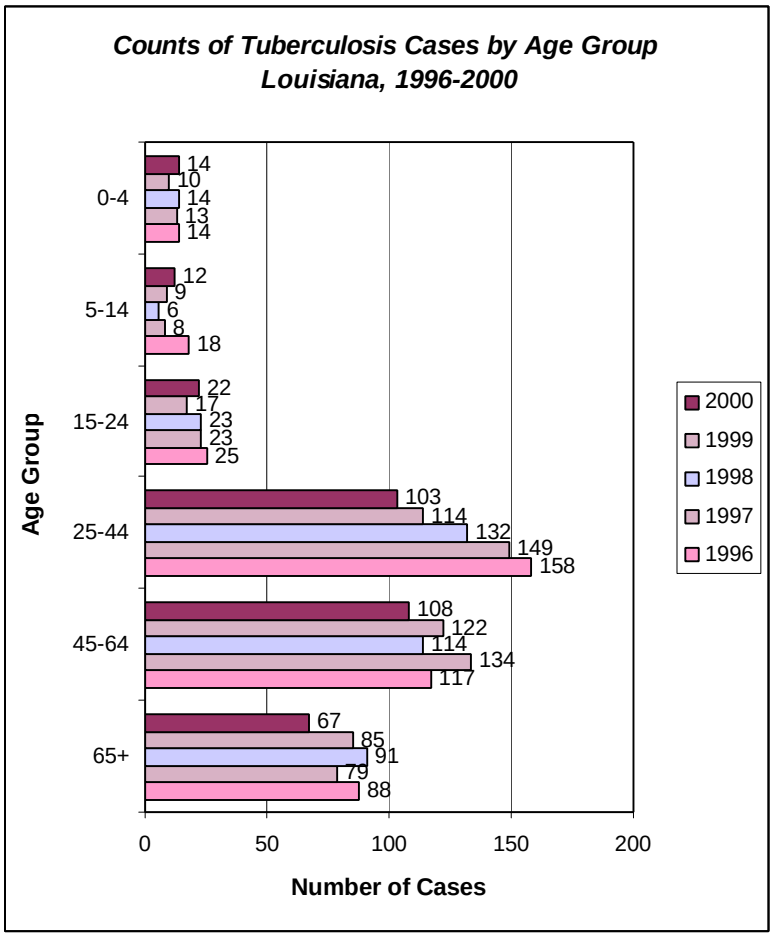
In 2000, Louisiana's state ranking for TB case rates (per 100,000) was the 6th highest in the nation. Louisiana's 2000 rate was similar to those in neighboring states, but was significantly higher than the national rate of 5.8 per 100,000. The national rate for 2000 declined 6.6% from 1999.

Tuberculosis Cases and Rates Louisiana and Neighboring States, 1999*		
State	***Number of Cases***	***Case Rate***
Alabama	312	7.0
Arkansas	199	7.4
Louisiana	331	7.4
Mississippi	173	6.1
Texas	1,506	7.2
United States	16,372	5.8

*Rate per 100,000 population
Source: Louisiana Office of Public Health, Tuberculosis Program
National Surveillance System, Division of Tuberculosis Elimination, Centers for Disease Control and Prevention

Drug-resistant TB continues to be a problem in Louisiana. While only one case of multi-drug-resistant tuberculosis (MDR-TB) was reported in 2000, the incidence of single-drug (INH) resistance continues to exceed 4% -- the recommended threshold for initiating a four-drug anti-TB regimen for new (or suspected) cases of TB.

As shown in the following graph, increases in the number of reported cases of TB were observed in younger age groups (below age 25 years), and decreases were seen in all other age groups



Source: Louisiana Office of Public Health, Tuberculosis Program

Louisiana Tuberculosis Cases and Rates
By Region and Parish, 2000

State Total = 331
State Case Rate = 7.6 per 100,000

Region/Parish	Cases	Rate/100,000
Region 1	134	13.4
Jefferson	32	7.1
Orleans	97	21.0
Plaquemines	0	0.0
St Bernard	5	7.6
Region 2	25	4.3
Ascension	1	1.4
East Baton Rouge	17	4.3
East Feliciana	3	14.2
Iberville	1	3.2
Pointe Coupee	2	8.5
West Baton Rouge	1	4.9
West Feliciana	0	0.0
Region 3	19	4.9
Assumption	0	0.0
Lafourche	4	4.5
St Charles	3	6.2
St James	0	0.0
St John The Baptist	3	7.1
St Mary	4	7.0
Terrebonne	5	4.8
Region 4	40	7.4
Acadia	2	3.5
Evangeline	4	11.7
Iberia	1	1.4
Lafayette	20	10.7
St Landry	9	10.7
St Martin	0	0.0
Vermilion	4	7.7
Region 5	17	6.1
Allen	0	0.0
Beauregard	0	0.0
Calcasieu	14	7.8
Cameron	0	0.0
Jefferson Davis	3	9.5
Region 6	13	4.3
Avoyelles	0	0.0
Catahoula	0	0.0
Concordia	2	9.7
Grant	1	5.2
La Salle	1	7.3
Rapides	6	4.7
Vernon	2	3.9
Winn	1	5.7

Louisiana Tuberculosis Cases and Rates
By Region and Parish, 2000

State Total = 331
State Case Rate = 7.6 per 100,000

Region/Parish	Cases	Rate/100,000
Region 7	37	7.3
Bienville	2	12.7
Bossier	3	3.2
Caddo	26	10.8
Claiborne	0	0.0
De Soto	0	0.0
Natchitoches	0	0.0
Red River	0	0.0
Sabine	1	4.2
Webster	5	11.7
Region 8	30	8.6
Caldwell	0	0.0
East Carroll	1	11.5
Franklin	1	4.5
Jackson	0	0.0
Lincoln	5	12.2
Madison	3	23.1
Morehouse	5	16.0
Ouachita	13	8.9
Richland	1	4.7
Tensas	0	0.0
Union	1	4.5
West Carroll	0	0.0
Region 9	16	3.7
Livingston	3	3.3
St Helena	1	10.4
St Tammany	2	1.0
Tangipahoa	8	8.1
Washington	2	4.6

Source: Louisiana Office of Public Health, Tuberculosis Program

C. SEXUALLY TRANSMITTED DISEASES

Overview

Sexually transmitted diseases (STDs) are the most commonly reported diseases in the United States and affect almost 15.3 million Americans in all population groups each year. By age 21, one in five young adults will have received treatment for an STD. Among the most serious complications are pelvic inflammatory disease, infertility, ectopic pregnancy, blindness, cancer associated with human papillomavirus, fetal and infant deaths, and congenital defects.[1]

STD Rates and National Rankings***
Louisiana, 1996-2000

Year	Primary and Secondary Syphilis		Gonorrhea		Chlamydia	
	Rate	Rank	Rate	Rank	Rate	Rank
1996	13	6	222	8	260	4
1997	9	7	255	5	273	7
1998	10	3	297	4	363	5
1999	7	3	313	3	393	4
2000	5	-	314	-	425	-

*Rates per 100,000 population 1990

**States ranked from highest to lowest disease incidence. Nationwide ranks for 2000 not available yet.

Sources: Louisiana Office of Public Health, STD Control Program 2000
CDC STD Surveillance Report 1999

Syphilis

Syphilis infections are caused by *Treponema pallidum*, aspirochete (bacteria). The primary stage of the disease is characterized by a painless, indurated ulcer that appears at the site(s) of exposure in about 21 days (range of 10-90 days) and lasts from 1 to 5 weeks. The secondary stage, which usually appears 1 to 5 weeks after the primary ulcer has healed, is characterized by skin rash, mucous patches, and condylomata lata, sometimes accompanied by generalized lymphadenopathy, headache, and fever. The latent stage is defined as any interval following the primary stage during which persons have no clinical signs or symptoms.

Louisiana had the 2nd highest rate of syphilis nationwide during 1995; then in 1996 the rate fell to the 6th highest rate, followed by a drop to 7th in 1997. In 1998 and 1999 rates rose to the 3rd highest. The total number of cases of early syphilis (primary, secondary, and early latent syphilis) is consistently declining, from 5,373 cases in 1993, to 441 cases in 2000. In 1999, 53% of early syphilis cases occurred in females, and 87% of the cases occurred in African-Americans. Sixty-six percent of early syphilis cases occurred among the 15-34 year-old population.

During the last five years, sharp and consistent declines in early syphilis rates have occurred. In the white population, the rate decreased 40% between 1995 and 1996 and 33% between 1996 and 1997. However, early syphilis rates increased 50% between 1997 and 1998 and remained unchanged in 1999. In African-Americans, the rate decreased 43% between 1995 and 1996, 40% between 1996 and 1997, 6% between 1997 and 1998, and 21% between 1998 and 1999.

[1] National Center for Health Statistics. *Healthy People 2000 Review, 1997*. Hyattsville, Maryland: Public Health Service. 1997.

Early Syphilis (Primary, Secondary, and Early Latent) Rates* by Sex and Race Louisiana, 1995-1999									
	White			Black			Other		
Year	Males	Females	Total	Males	Females	Total	Males	Females	Total
1995	3	6	5	181	197	189	17	7	12
1996	2	3	3	107	109	108	2	5	4
1997	2	2	2	61	68	65	2	2	2
1998	3	3	3	64	58	61	10	7	9
1999	3	3	3	48	47	48	0	7	4

*Rate per 100,000 population 1990

Source: Louisiana Office of Public Health, STD Control Program

The Louisiana incidence rate for primary and secondary syphilis for 1999 was 7.0 per 100,000 people (Census 1990), and the national rate was 2.5. *The Healthy People 2000 Review 1997* objective for primary and secondary syphilis is to reduce the incidence rate to no more than 4 cases per 100,000 people and the incidence among African-Americans to no more than 30 cases per 100,000.

Primary and Secondary Syphillis Rates* Louisiana, Neighboring States, and United States, 1995-1999					
State	1995	1996	1997	1998	1999
Alabama	14.4	12.4	9.6	6.3	4.6
Arkansas	19.9	10.5	6.9	4.3	3.4
Louisiana	24.0	12.3	8.4	9.9	7
Mississippi	72.4	30.4	14.4	9.6	7
Texas	8.3	4.8	3.5	2.3	2.4
United States	6.3	4.3	3.2	2.6	2.5

*Rate per 100,000 population

Sources: Louisiana Office of Public Health, STD Control Program 2000
CDC STD Surveillance Report 1999

Gonorrhea

Infections by *Neisseria gonorrhoeae* may be symptomatic or asymptomatic, and they include genital, anorectal, and pharyngeal infections.

Louisiana had the 8th highest rate of gonorrhea nationwide in 1996. In 1997, Louisiana moved to the 5th highest, then to the 4th highest in 1998, and to the 3th highest in 1999. The total number of cases of gonorrhea had been consistently declining, from 10,816 cases in 1995 to 10,761 cases in 1997, in 1998 the number rose to 12,543, mainly due to improved laboratory reporting, in 1999, the total number was 13,198, and in 2000, the total number of cases was 13,265. In 1999, 50% of the cases of gonorrhea occurred in females; 86% of cases occurred in African-Americans; 32% of the cases occurred among teens 15-19 year old, and 34% of the cases of gonorrhea occurred among 20-24 year olds.

Gonorrhea Rates* by Sex and Race Louisiana, 1995-1999									
	White			Black			Other		
Year	Males	Females	Total	Males	Females	Total	Males	Females	Total
1995	18	29	23	940	564	740	37	41	39
1996	14	27	21	842	489	655	37	59	48
1997	17	36	27	833	615	717	66	88	78
1998	19	35	28	958	757	851	49	124	88
1999	25	48	37	966	792	874	41	63	52

*Rate per 100,000 population 1990

Source: Louisiana Office of Public Health, STD Control Program

The Louisiana incidence rate of gonorrhea for 1999 was 313 per 100,000 population (Census 1990), and the national rate for 1999 was 133.2. *The Healthy People 2000 Review 1997* objective for gonorrhea, is to reduce the rate to: a) an incidence of no more than 100 cases per 100,000 people; b) an incidence of no more than 650 cases per 100,000 among African-Americans; c) an incidence of no more than 375 per 100,000 persons age 15-19, and d) an incidence of no more than 175 per 100,000 persons age 15-44.

Gonorrhea Rates* Louisiana, Neighboring States, and United States, 1995-1999					
State	1995	1996	1997	1998	1999
Alabama	345	310	282	295	250
Arkansas	227	204	175	157	127
Louisiana	214	215	249	287	302
Mississippi	353	250	307	392	378
Texas	165	124	139	169	167
United States	149	124	123	133	133

*Rate per 100,000 population

Sources: Louisiana Office of Public Health, STD Control Program 2000
CDC STD Surveillance Report 1999

Chlamydia

Infection caused by *Chlamydia trachomatis* is among the most prevalent STDs in the United States. Therapy for these infections is commonly based on the clinical syndrome, or as simultaneous treatment for gonorrhea.

Louisiana had the 11th highest rate of chlamydia nationwide in 1995. In 1996, Louisiana rose to the 4th highest rate, and then dropped to the 7th highest in 1997. In 1998 Louisiana had the 5th highest rate. The total number of cases of chlamydia had been declining, from 11,079 cases in 1993 to 10,727 cases in 1995, but went slightly up to 10,991 in 1996, to 11,512 in 1997, rose to 15,305 in 1998, to 16,573 in 1999, and to 17,921 in 2000. In 1999, 79% of chlamydia cases occurred in females; 74% of cases occurred in African-Americans; 42% of cases among 15-19 year-olds, and 36% of the chlamydia cases occurred among 20-24 year-olds.

The Louisiana chlamydia rate for 1999 was 349 per 100,000 population (Census 1990), and the national rate for 1999 was 254.1. *The Healthy People 2000 Review 1997* objective for

chlamydia trachomatis infections is to reduce the prevalence in women under 25 years of age to no more than 5% (as measured by a decrease in the prevalence of chlamydia infection among family planning clients).

Chlamydia Rates* by Sex and Race
Louisiana, 1995-1999

	White			Black			Other		
Year	Males	Females	Total	Males	Females	Total	Males	Females	Total
1995	12	102	58	251	1011	657	37	176	106
1996	14	27	21	842	489	655	37	59	48
1997	17	36	27	833	615	717	66	88	78
1998	25	125	76	411	1360	919	71	278	174
1999	30	141	87	448	1369	941	24	198	111

*Rate per 100,000 population 1990
Source: Louisiana Office of Public Health, STD Control Program

Chlamydia Rates*
Louisiana, Neighboring States, and United States, 1995-1999

State	1995	1996	1997	1998	1999
Alabama	75	195	204	233	284
Arkansas	32	27	85	163	231
Louisiana	254	260	363	349	381
Mississippi	34	161	291	389	420
Texas	238	230	265	311	319
United States	190.4	194.5	207.0	236.6	254

*Rate per 100,000 population
Sources: Louisiana Office of Public Health, STD Control Program 2000
CDC STD Surveillance Report 1999

Sexually Transmitted Disease Rates* by Parish
Louisiana, 2000

Parish	Early Syphilis (Primary, Secondary, and Early Latent)	Gonorrhea	Chlamydia
State Total	17.0	313.0	393.0
Acadia	34.0	128.8	202.2
Allen	4.7	66.0	207.3
Ascension	13.7	171.8	271.4
Assumption	0.0	180.2	356.0
Avoyelles	2.6	94.5	168.5
Beauregard	13.3	83.1	222.7
Bienville	0.0	256.6	638.3
Bossier	2.3	325.2	442.6
Caddo	0.8	823.0	916.4
Calcasieu	21.4	225.4	322.4
Caldwell	0.0	152.9	387.4
Cameron	0.0	75.6	140.4
Catahoula	0.0	117.5	235.0
Claiborne	0.0	287.3	425.2
Concordia	4.8	134.4	312.1
DeSoto	0.0	512.9	690.4
East Baton Rouge	18.4	448.3	457.0

*Rate per 100,000 population 1990

Sexually Transmitted Disease Rates* by Parish Louisiana, 2000			
Parish	Early Syphilis (Primary, Secondary, and Early Latent)	Gonorrhea	Chlamydia
East Carroll	10.3	484.1	813.7
East Feliciana	5.2	177.0	348.8
Evangeline	9.0	111.2	249.4
Franklin	4.5	165.3	299.3
Grant	0.0	22.8	131.2
Iberia	77.6	358.7	544.7
Iberville	6.4	222.2	473.4
Jackson	6.4	108.2	299.3
Jefferson	1.3	147.4	225.7
Jefferson Davis	16.3	107.4	358.0
Lafayette	20.6	197.9	349.6
Lafourche	17.5	158.4	266.7
LaSalle	0.0	29.3	65.9
Lincoln	4.8	328.2	541.4
Livingston	1.4	85.1	150.3
Madison	0.0	329.0	706.0
Morehouse	6.0	523.0	539.0
Natchitoches	8.0	559.0	801.0
Orleans	23.0	566.0	769.0
Ouachita	4.0	525.0	562.0
Plaquemines	8.0	78.0	102.0
Pointe Coupee	53.0	169.0	315.0
Rapides	4.0	259.0	401.0
Red River	21.0	586.0	1097.0
Richland	5.0	271.0	475.0
Sabine	0.0	199.0	358.0
St. Bernard	3.0	47.0	122.0
St. Charles	12.0	94.0	191.0
St. Helena	0.0	243.0	425.0
St. James	10.0	192.0	421.0
St. John	20.0	275.0	470.0
St. Landry	9.0	344.0	336.0
St. Martin	0.0	171.0	246.0
St. Mary	14.0	210.0	293.0
St. Tammany	10.0	119.0	107.0
Tangipahoa	19.0	511.0	614.0
Tensas	0.0	267.0	338.0
Terrebonne	38.0	288.0	364.0
Union	0.0	280.0	319.0
Vermilion	0.0	118.0	104.0
Vernon	6.0	97.0	242.0
Washington	16.0	340.0	245.0
Webster	0.0	269.0	433.0
West Baton Rouge	15.0	113.0	129.0
West Carroll	0.0	41.0	149.0
West Feliciana	8.0	77.0	163.0
Winn	6.0	68.0	123.0

*Rate per 100,000 population 1990

Source: Louisiana Office of Public Health, STD Control Program

D. HIV/AIDS

Background

AIDS (Acquired Immunodeficiency Syndrome) is caused by the *human immunodeficiency virus*, or HIV. People infected with HIV can develop many health problems, including extreme weight loss, severe pneumonia, forms of cancer, and damage to the nervous system. These illnesses signal the onset of AIDS. The time at which symptoms first begin to appear varies from person to person. In some people these illnesses may develop within a year or two, others may stay healthy for 10 years of more. Although recent advances in treatment have significantly slowed the progression from HIV to AIDS and AIDS to death, there is still no cure for AIDS. This means that the most effective way to curb the HIV/AIDS epidemic is through the provision of HIV prevention interventions, and improved access to treatment and other services for HIV-infected persons.

The epidemic continues to greatly impact public health in Louisiana and will make growing demands on health and social service systems for many decades. The lifetime medical cost of caring for a person with AIDS is over $100,000, most of which is paid by the government. Each year, new infections obligate Louisiana to approximately $120 million in future medical costs.

Summary

- As of December 31, 1999, there were 12,090 persons reported to be living with HIV/AIDS in Louisiana. In 1999, 854 new AIDS cases were diagnosed and 1,249 new HIV cases were detected and reported.
- During 1999, 75% of newly-detected HIV/AIDS cases and 74% of newly-diagnosed AIDS cases were in African-Americans. The HIV detection rates for African-Americans remain disproportionately high; they are over six times higher than among whites.
- Overall, it is estimated that the numbers of new infections each year are now similar among men who have sex with men (MSM), injection drug users, and high-risk heterosexuals. For African- Americans, high-risk heterosexual activity has become the leading exposure category; and among whites, the predominant exposure is MSM.
- AIDS-related mortality began to decline dramatically in 1996, coinciding with the emergence of more effective treatments; however, the number of AIDS-related deaths appears to be stabilizing.
- The transmission of HIV from mothers to their infants has dropped dramatically in Louisiana, from over 25% in 1993 to 5% in 1998.

1999 Status

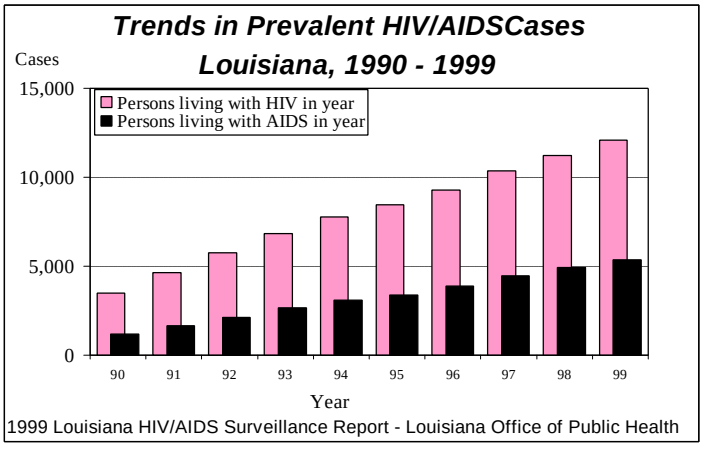
Louisiana's rank decreased from 7th highest in 1998 to 10th highest in 1999 among states with the highest AIDS rates. However, the HIV/AIDS case rate continued to be higher in Louisiana than in neighboring states.

AIDS Cases and Rates Louisiana, Neighboring States, and United States, 1997-1999									
	1997		1998		1999		Cumulative Totals		
State	Cases	Rate/ 100,000	Cases	Rate/ 100,000	Cases	Rate/ 100,000	Adults	Children less than 13	Total
Alabama	568	13.1	484	11.1	476	10.9	5,724	68	5,792
Arkansas	242	9.6	203	8	194	7.6	2,745	38	2,783
Louisiana	1,090	25	951	21.8	854	19.5	11,851	119	11,970
Mississippi	345	12.6	415	15.1	421	15.2	3,981	56	4,037
Texas	4,672	24.1	3,967	20.1	3,181	15.9	51,079	370	51,449
United States	60,270	22.1	48,269	17.6	46,400	16.7	724,656	8,718	733,374

Source: Louisiana Office of Public Health, HIV/AIDS Program

For the first time, in 1999 the Baton Rouge region surpassed the New Orleans region in the number of AIDS cases diagnosed per population. Among large cities in the nation, the AIDS case rate for metro Baton Rouge ranked 12th highest; the metro New Orleans AIDS case rate was 14th. Among the 31 states with HIV reporting, Louisiana had the 5th highest number of newly detected HIV cases in 1999 and the 5th highest number of persons living with HIV infection.

Persons Living with HIV/AIDS



New highly active antiretroviral therapies (HAART), which have been shown to be effective in the treatment of HIV infection, have altered the natural history of HIV infection. These new therapies have delayed the progression from HIV to AIDS and from AIDS to death among many people infected with HIV. For this reason, AIDS surveillance data no longer accurately represent current trends in HIV transmission. AIDS surveillance data now reflect differences in access to treatment and the potential failure of certain treatment regimens.

Due to the widespread use of new HIV treatments, there has been a recent reduction in morbidity and mortality among HIV-infected persons. Compared to 1996 statistics, in 1999, deaths in men have decreased by 49%, deaths in women by 35%, in African-Americans 39%, and in whites 57%. Although all groups have experienced a significant decrease in mortality, the African-American population and women have experienced a smaller decline in deaths than the white and male populations respectively. These statistics suggest that recent advances

have been less effective at the population level in African-Americans and in women, possibly because these groups have disproportionate access to treatments.

The decline in morbidity and mortality has led to an increase in the number of persons living with HIV/AIDS. As of December 1999, a total of 12,090 persons in Louisiana were known to be living with HIV/AIDS, including 202 cases in children under 15. These numbers reflect only those persons who were confidentially tested and whose case was reported to the Health Department. Thus, these numbers certainly underestimate the total number of persons infected with HIV in Louisiana and should be considered minimum estimates. As the number of persons living with HIV continues to increase, more resources will need to be directed toward programs and services that address prevention, early detection, and effective treatment.

Currently, HIV impacts every parish in Louisiana. The HIV/AIDS Program has funded community-based organizations in every region of the state to deliver HIV prevention programs to persons at high risk and to provide services for persons with HIV/AIDS.

Persons Living with HIV/AIDS by Parish
Louisiana, December 1999

Parish	Persons Living with HIV/AIDS	Parish	Persons Living with HIV/AIDS
Statewide	**12,090**	**Region VI**	**505**
		Avoyelles	127
Region I	**5565**	Catahoula	9
Jefferson	980	Concordia	16
Orleans	4483	Grant	11
Plaquemines	21	La Salle	5
St.Bernard	81	Rapides	243
		Vernon	45
Region II	**2514**	Winn	49
Ascension	74		
East Baton Rouge	1955	**Region VII**	**803**
East Feliciana	91	Bienville	11
Iberville	174	Bossier	96
Pointe Coupee	32	Caddo	524
West Baton Rouge	70	Claiborne	56
West Feliciana	118	De Soto	18
		Natchitoches	45
Region III	**366**	Red River	6
Assumption	19	Sabine	16
Lafourche	58	Webster	31
St.Charles	50		
St.James	35	**Region VIII**	**514**
St.John the Baptist	43	Caldwell	7
St.Mary	52	East Carroll	12
Terrebonne	109	Franklin	12
		Jackson	6
Region IV	**721**	Lincoln	36
Acadia	49	Madison	32
Evangeline	24	Morehouse	34
Iberia	61	Ouachita	298
Lafayette	380	Richland	37
St.Landry	112	Tensas	14
St.Martin	45	Union	18
Vermilion	50	West Carroll	8
Region V	**591**	**Region IX**	**508**
Allen	131	Livingston	71
Beauregard	49	St.Helena	5
Calcasieu	372	St.Tammany	189
Cameron	4	Tangipahoa	116
Jefferson Davis	35	Washington	127
		Unknown	3

1999 Louisiana HIV/AIDS Surveillance Report - Louisiana Office of Public Health

Shifts in the Epidemic

In keeping with national trends, over the last decade Louisiana has seen a shift in the HIV/AIDS epidemic towards women, minorities, adolescents, high-risk heterosexuals, intravenous drug users and rural communities. HIV/AIDS has been steadily on the rise in the heterosexual population. The percentage of persons living with HIV/AIDS, who likely contracted their infection through high-risk heterosexual contact, increased from 7% in 1990 to an estimated 19% in 1999. Additionally, the percentage of persons living with HIV/AIDS, who likely contracted their infection through injection drug use, has also increased from 15% in 1990 to 24% in 1999. Although the majority of all cases continue to be in men who have sex with men, the proportion of cases attributable to high-risk heterosexual contact and injection drug use is increasing.

African-Americans continue to be disproportionately impacted by HIV/AIDS. In 1999, 75% of newly detected HIV/AIDS cases were in African-Americans, while African-Americans comprise only 31% of the population. The HIV detection rates for African-Americans are over six times higher than those among whites and three times higher than those among Hispanics.

The percentage of newly detected HIV/AIDS cases reported among women in Louisiana steadily has been increasing. In 1993, 21% of all cases were women, and in 1999, 30% of all new cases detected were women. African-American women accounted for 85% of all new HIV/AIDS cases in women detected in 1999.

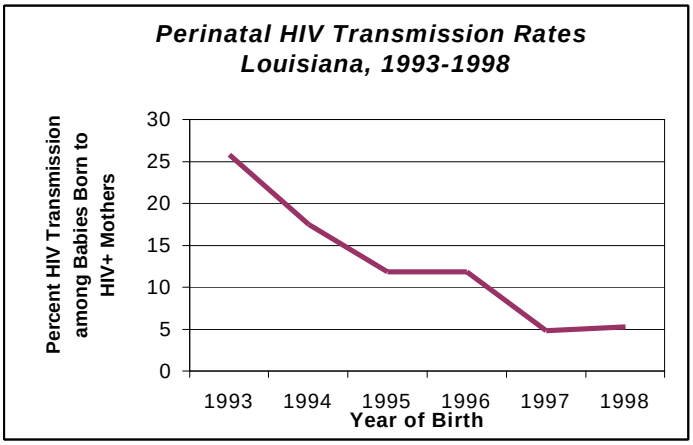
Persons Living with HIV/AIDS, by Demographics and Exposure Group
Louisiana, 1994-1999

	1994	*1995*	*1996*	*1997*	*1998*	*1999*
Total Living Cases	7,760	8,445	9,297	10,368	11,237	12,090
Gender						
Male	80%	78%	76%	75%	74%	74%
Female	20%	22%	24%	25%	26%	26%
Ethnicity						
African-American	56%	58%	60%	61%	63%	64%
White	41%	39%	37%	36%	34%	33%
Other	3%	3%	3%	3%	3%	3%
Unknown	<1%	<1%	<1%	<1%	<1%	<1%
Exposure Group						
Cases with Specified Risk	6,488	6,839	7,224	7,731	8,109	8,267
MSM*	59%	56%	54%	53%	53%	53%
IDU*	23%	24%	25%	25%	25%	24%
HRH*	14%	16%	17%	18%	19%	19%
Transf/Hemo*	2%	2%	2%	2%	2%	2%
Perinatal	1%	2%	2%	2%	2%	2%

* MSM: Men who have Sex with Men; IDU: Injection Drug Users (non-MSM); HRH: High Risk Heterosexual; Transf/Hemo: Transfusion/Transplant/Hemophiliac

Source: Louisiana Office of Public Health, HIV/AIDS Program

Despite the increasing number of women infected with HIV, the number of pediatric HIV/AIDS cases (children diagnosed when younger than thirteen years of age) has been decreasing in recent years. Perinatal transmission rates have dropped dramatically from over 25% in 1993 to 5% in 1998. This decline is credited to improved treatment protocols for HIV-infected pregnant women and increased use of antiretroviral therapy during pregnancy and delivery. The HIV/AIDS Program's Perinatal Prevention program continues to work with medical centers and providers around the state to reinforce the importance of universally offering HIV counseling and testing to all pregnant women, and early diagnosis and treatment for HIV-infected pregnant women.



Source: Louisiana Office of Public Health, HIV/AIDS Program

E. CANCER

1994-1998 Status

According to the American Cancer Society, one in every four deaths in the United States is attributable to cancer. More people are surviving cancer now than ever before, but this trend is not true for all groups. Survival rates can vary according to race.

Due to the possibility of natural fluctuations in cancer incidence during the course of a year, disease counts and rates have been combined to encompass a five-year period. This allows a more reliable identification of the cancers that are of most concern in our state.

Five Most Common Cancers
Louisiana, 1994-1998
(Five-Year Case Count)

Type	Number of Cases
All Cancers	92,996
Lung	16,099
Prostate	14,156
Breast	13,079
Colon & Rectum	10,983
Bladder	3,589

Source: Louisiana Tumor Registry

The risk for many cancers can be significantly reduced by practicing preventive measures. The National Cancer Institute estimates that tobacco accounts for 30% of cancers, and dietary factors account for another 35%. For example, most of the lung cancers can be prevented by not smoking, and diets low in fat and high in fiber may help prevent colon, rectal, breast, prostate and other cancers.

Both preventive measures and early detection are important in lowering cancer death rates. Mammography, clinical breast examination, Pap tests, fecal occult blood tests and proctosigmoidoscopy (colon exam with lighted scope) make it possible to detect and treat cancers in their early stages and prevent spreading. However, despite modern technology and knowledge, a significant portion of the population at risk for various cancers fails to participate in screening procedures.[2]

Cancer is not just one, but many, diseases and is associated with a variety of risk factors. Since 1950, overall cancer mortality rates have changed little, but there have been significant changes in mortality for some age groups and cancers. Several prevalent forms of cancer can be either prevented or – in the case of breast or prostate cancer – diagnosed early enough to prevent the spread to other organs.

[2] *Healthy People 2000: National Health Promotion and Disease Prevention Objectives*. United States Department of Health and Human Services. Washington: GPO, 1990.

Five Most Common Cancers In Louisiana Males, 1994-1998					
Whites		Blacks		Total *	
Type	Rate**	Type	Rate**	Type	Number
All Cancers	479.3	All Cancers	555.8	All Cancers	49,812
Prostate	131.0	Prostate	184.0	Prostate	14,156
Lung	95.2	Lung	123.5	Lung	10,096
Colon & Rectum	55.8	Colon & Rectum	55.8	Colon & Rectum	5,610
Bladder	29.5	Stomach	19.3	Bladder	2,610
Non-Hodgkin's Lymphoma	18.6	Oral Cavity & Pharynx	17.1	Non-Hodgkin's Lymphoma	1,759

* All races combined

** Average annual age-adjusted (1970 US) incidence rates per 100,000 population

Source: Louisiana Tumor Registry

Five Most Common Cancers In Louisiana Females, 1994-1998					
Whites		Blacks		Total *	
Type	Rate**	Type	Rate**	Type	Number
All Cancers	324.0	All Cancers	310.6	All Cancers	43,183
Breast	101.0	Breast	89.7	Breast	12,927
Lung	47.6	Colon & Rectum	41.3	Lung	6,003
Colon & Rectum	36.3	Lung	39.0	Colon & Rectum	5,373
Corpus Uteri	14.5	Cervix Uteri	15.6	Corpus Uteri	1,837
Non-Hodgkin's Lymphoma	13.3	Corpus Uteri	13.3	Non-Hodgkin's Lymphoma	1,649

* All races combined

** Average annual age-adjusted (1970 US) incidence rates per 100,000 population

Source: Louisiana Tumor Registry

Background[3]

Breast cancer is the most frequently occurring invasive cancer among women in the United States and is second only to lung cancer in cancer-related deaths. Nationwide, the death rate from breast cancer decreased 8% between 1987-91 and 1993-97. Certain factors—such as family history, exposure to hormones, reproduction issues, and excessive alcohol use—can influence the risk for breast cancer. The association between high-fat diets and increased breast cancer risk has not been firmly established. It has recently been discovered that alterations in two genes can account for most inherited breast cancer, which constitutes 5-10% of all breast cancers. Early detection improves the chances of survival, and the National Cancer Institute recommended in 1997 that women in their forties or older get screening mammograms on a regular basis, every 1 to 2 years. Women who are at increased risk for breast cancer should seek medical advice about when to begin having mammograms and how often to be screened.

[3] From National Cancer Institute (NCI) and American Cancer Society resources and publications. Statistics quoted pertain to the United States.

Cervical cancer (cervix uteri) afflicts 13,000 women each year. Increased use of the Pap test has contributed to an almost 50 percent drop in cervical cancer deaths since 1973. Women who are or have been sexually active, or have reached age 18, should have Pap tests and physical exams regularly.

Colorectal cancer was the second leading cause of cancer death, third among men and third in women, in 1993-97. Studies have shown that lifestyle factors may cause colon and rectum cancers. A diet high in fruits, vegetables and fiber and low in fat appears to reduce the risk of colorectal cancer. Exercise may also lower risk for this cancer. Although there is no general agreement that screening for colon cancer definitely reduces mortality, annual fecal occult blood tests have proved useful in identifying people who should have further tests to rule out colon cancer and other diseases, especially for those over 50. The potential benefit of regular sigmoidoscopies is currently being investigated by the NCI.

Kidney cancer accounted for approximately 2% of all new 1993-97 cancers in the U.S. Renal cell cancer and renal pelvis cancer accounted for 92% and 8% of kidney cases respectively. While abuse of analgesics has been causally linked to increased risk, and beverages such as coffee, tea, and alcoholic drinks have not been found to be important risk factors, a consistent risk factor has been obesity. Perhaps the best-known factor is cigarette smoking. Given the present knowledge about cancers of the kidney, prevention is best achieved by cessation of cigarette smoking. About one third of renal cell cancers and more than one half of renal pelvis and ureter cancers could be avoided by eliminating the use of tobacco.

Leukemias together accounted for 2.5% of the total 1993-97 cancer incidence in the U.S. and about one third of cancers in children. Five main types (and an increasing number of subtypes) have been identified. Rates for all types of leukemia are higher among males than among females; for most leukemias, rates are higher among Caucasians than African Americans.

Lung cancer is the largest single cause of cancer mortality in the United States. It is difficult to detect and hard to treat, and in 1993-97 caused approximately 30% of all cancer deaths. Smoking is responsible for 85% of lung cancers. The risk of dying of lung cancer is 22 times higher for male smokers and 12 times higher for female smokers than for people who have never smoked. Unfortunately, smoking rates have begun to rise in children for the last several years.

Melanoma of the skin incidence has increased dramatically over the last several decades. It represented only about 5% of all 1993-97 skin cancers in the U.S. but was responsible for about 75% of all skin cancer deaths. Survival rates have been increasing because of earlier diagnoses, but the total mortality rate continues to rise gradually with the increase in incidence.

Non-Hodgkin's lymphoma cases have been increasing continuously but inexplicably over the past several decades, but the rate of increase apparently slowed in the 1990s. Part of this increase is due to AIDS-related cases. The cofactors that predispose AIDS cases to lymphoma need elucidation, and research is needed into other possible causes, such as hair-coloring products, pesticides, nitrates, solvents, other industrial chemicals, and viruses other than HIV.

Oral cavity & pharynx cancer accounted for approximately 2.5% of all malignancies in 1993-97. In Americans, oral cancer is 2-3 times more common among males than females. Tobacco and alcohol account for approximately three fourths of all oral cancers in the U.S. Epidemiologic evidence indicates that smoking and drinking are independent risk factors that produce a synergistic effect when combined. Use of snuff is a primary cause of cancers of the gum and cheek. Although not as prevalent, habitual use of pipes, cigars, and smokeless tobacco is associated with relative risks as great as that for cigarette smoking.

Ovarian cancer strikes over 11,000 women every year. Currently, the five-year survival rate is approximately 50%. The NCI is conducting a study to determine whether screening can detect the cancer early enough to reduce mortality.

Pancreatic cancer is a 'silent' disease that is asymptomatic until well advanced. Survival is poor; only about 4% of patients are alive five years after diagnosis. In 1993-97 it ranked 11th of all cancers in the U.S. for incidence but was fourth for cancer mortality. Little is known about the etiology, and the only established risk factor is cigarette smoking.

Prostate cancer is the most frequently diagnosed invasive cancer in men but is a distant second to lung cancer as a cause of death. There is increasing evidence that diet plays an important role in prostate cancer development. Hormones are also being investigated, as well as occupational and other lifestyle factors. The NCI is currently conducting a study to determine whether regular screening with a digital rectal exam and a blood test for prostate-specific antigen (PSA) is beneficial.

Urinary bladder cancer was the fifth most common of all 1993-97 cancers in the United States, where it is chiefly a disease of white men over 65. The most important known risk factor is cigarette smoking; smokers demonstrate a 2-3 fold increased risk over non-smokers. Workers who are exposed to benzidine and 2-naphthylamine are believed to be at an elevated risk for bladder cancer due to the potent carcinogenicity of these two chemicals. Artificial sweeteners do not appear to increase risk, and coffee drinking appears to have little or no effect.

Uterine cancer (corpus uteri), the fourth most common cancer in U.S. women, accounted for approximately 6% of all 1993-97 cases. However, a limited number of deaths results from this disease, as reflected in a high five-year survival rate of 88%.

Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
LOUISIANA	All Cancers	92,996	All Cancers	49,813	All Cancers	43,183
	Lung	16,099	Prostate	14,156	Breast	12,927
	Prostate	14,156	Lung	10,096	Lung	6,003
	Breast	13,079	Colon & Rectum	5,610	Colon & Rectum	5,373
	Colon & Rectum	10,983	Bladder	2,610	Corpus Uteri	1,837
	Bladder	3,589	Non-Hodgkin's Lymphoma	1,759	Non-Hodgkin's Lymphoma	1,649
Region 1	All Cancers	23,115	All Cancers	11,905	All Cancers	11,210
	Lung	3,936	Prostate	3,175	Breast	3,415
	Breast	3,454	Lung	2,319	Lung	1,617
	Prostate	3,175	Colon & Rectum	1,347	Colon & Rectum	1,414
	Colon & Rectum	2,761	Bladder	690	Corpus Uteri	456
	Bladder	952	Non-Hodgkin's Lymphoma	487	Non-Hodgkin's Lymphoma	403
Jefferson	All Cancers	9,978	All Cancers	5,136	All Cancers	4,842
	Lung	1,682	Prostate	1,371	Breast	1,488
	Breast	1,502	Lung	973	Lung	709
	Prostate	1,371	Colon & Rectum	586	Colon & Rectum	571
	Colon & Rectum	1,157	Bladder	340	Corpus Uteri	200
	Bladder	448	Non-Hodgkin's Lymphoma	230	Non-Hodgkin's Lymphoma	196
Orleans	All Cancers	11,010	All Cancers	5,658	All Cancers	5,352
	Lung	1,819	Prostate	1,550	Breast	1,661
	Breast	1,681	Lung	1,091	Lung	728
	Prostate	1,550	Colon & Rectum	625	Colon & Rectum	714
	Colon & Rectum	1,339	Bladder	284	Corpus Uteri	214
	Bladder	408	Non-Hodgkin's Lymphoma	206	Cervix Uteri	198
Plaquemines	All Cancers	468	All Cancers	257	All Cancers	211
	Lung	96	Lung	63	Breast	59
	Breast	61	Prostate	59	Lung	33
	Prostate	59	Colon & Rectum	21	Colon & Rectum	19
	Colon & Rectum	40	Oral Cavity & Pharynx / Bladder	16 *	Bladder / Corpus Uteri	8 *
	Bladder	24	Non-Hodgkin's Lymphoma	11	Stomach / Ovary / Cervix Uteri / Non-Hodgkin's Lymphoma	7 *

* Number of cases is the same at each site.

** Contents of cells containing five or fewer cases are suppressed for reasons of confidentiality.

Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
St. Bernard	All Cancers	1,659	All Cancers	854	All Cancers	805
	Lung	339	Prostate	195	Breast	207
	Colon & Rectum	225	Lung	192	Lung	147
	Breast	210	Colon & Rectum	115	Colon & Rectum	110
	Prostate	195	Bladder	50	Non-Hodgkin's Lymphoma / Corpus Uteri	34 *
	Non-Hodgkin's Lymphoma	74	Non-Hodgkin's Lymphoma	40	Ovary	26
Region 2	All Cancers	11,531	All Cancers	6,373	All Cancers	5.158
	Prostate	2,160	Prostate	2,160	Breast	1,671
	Lung	1,734	Lung	1,097	Lung	637
	Breast	1,697	Colon & Rectum	715	Colon & Rectum	634
	Colon & Rectum	1,349	Bladder	337	Corpus Uteri	225
	Bladder	455	Kidney & Renal Pelvis	207	Non-Hodgkin's Lymphoma	197
Ascension	All Cancers	1,146	All Cancers	630	All Cancers	516
	Prostate	216	Prostate	216	Breast	165
	Lung	188	Lung	120	Lung	68
	Breast	168	Colon & Rectum	62	Colon & Rectum	60
	Colon & Rectum	122	Bladder	32	Ovary	23
	Bladder	42	Kidney & Renal Pelvis	28	Non-Hodgkin's Lymphoma	18
East Baton Rouge	All Cancers	7,875	All Cancers	4,276	All Cancers	3,599
	Prostate	1,502	Prostate	1,502	Breast	1,193
	Breast	1,211	Lung	710	lung	448
	Lung	1,158	Colon & Rectum	477	Colon & Rectum	439
	Colon & Rectum	916	Bladder	235	Corpus Uteri	159
	Bladder	319	Kidney & Renal Pelvis	138	Non-Hodgkin's Lymphoma	145
East Feliciana	All Cancers	523	All Cancers	312	All Cancers	211
	Prostate	95	Prostate	95	Breast	71
	Lung	82	Lung	65	Colon & Rectum	25
	Breast	72	Colon & Rectum	40	Lung	17
	Colon & Rectum	65	Bladder	14	Corpus Uteri	14
	Bladder	20	Oral Cavity & Pharynx	13	Thyroid / Non-Hodgkin's Lymphoma	8 *

* Number of cases is the same at each site.

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Iberville	All Cancers	736	All Cancers	419	All Cancers	317
	Prostate	131	Prostate	131	Breast	88
	Lung	114	Lung	70	Lung	44
	Breast	88	Colon & Rectum	42	Colon & Rectum	38
	Colon & Rectum	80	Bladder	25	Cervix Uteri	17
	Bladder	30	Kidney & Renal Pelvis	16	Ovary	15
Pointe Coupee	All Cancers	542	All Cancers	325	All Cancers	217
	Prostate	92	Prostate	92	Breast	59
	Colon & Rectum	91	Lung	56	Colon & Rectum	45
	Lung	81	Colon & Rectum	46	Lung	25
	Breast	60	Bladder	15	Corpus Uteri	10
	Bladder	20	Esophagus	13	Pancreas	8
West Baton Rouge	All Cancers	476	All Cancers	260	All Cancers	216
	Prostate	83	Prostate	83	Breast	73
	Breast	74	Lung	39	Lung	23
	Lung	62	Colon & Rectum	35	Colon & Rectum	21
	Colon & Rectum	56	Bladder	12	Ovary	14
	Non-Hodgkin's Lymphoma	20	Pancreas / Non-Hodgkin's Lymphoma	11 *	Corpus Uteri	11
West Feliciana	All Cancers	233	All Cancers	151	All Cancers	82
	Lung	49	Prostate	41	Breast	22
	Prostate	41	Lung	37	Lung	12
	Breast	24	Colon & Rectum	13	Colon & Rectum / Cervix Uteri	6 *
	Colon & Rectum	19	Oral Cavity & Pharynx	7	Corpus Uteri / Non-Hodgkin's Lymphoma / Brain	**
	Non-Hodgkin's Lymphoma	8	Kidney & Renal Pelvis	**	Bladder / Ovary	**
Region 3	All Cancers	6,731	All Cancers	3,725	All Cancers	3,006
	Lung	1,197	Prostate	937	Breast	931
	Breast	941	Lung	811	Lung	386
	Prostate	937	Colon & Rectum	459	Colon & Rectum	383
	Colon & Rectum	842	Bladder	209	Non-Hodgkin's Lymphoma	123
	Bladder	283	Non-Hodgkin's Lymphoma	144	Corpus Uteri	122

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Assumption	All Cancers	411	All Cancers	236	All Cancers	175
	Prostate	68	Prostate	68	Breast	63
	Lung / Breast	64 *	Lung	53	Colon & Rectum	21
	Colon & Rectum	49	Colon & Rectum	28	Lung	11
	Bladder	19	Bladder	15	Cervix Uteri	8
	Non-Hodgkin's Lymphoma	12	Leukemias	9	Non-Hodgkin's Lymphoma	6
Lafourche	All Cancers	1,541	All Cancers	825	All Cancers	716
	Lung	276	Prostate	208	Breast	216
	Breast	219	Lung	180	Colon & Rectum	97
	Prostate	208	Colon & Rectum	108	Lung	96
	Colon & Rectum	205	Bladder	46	Non-Hodgkin's Lymphoma	37
	Non-Hodgkin's Lymphoma	66	Non-Hodgkin's Lymphoma	29	Corpus Uteri	30
St. Charles	All Cancers	804	All Cancers	440	All Cancers	364
	Prostate	130	Prostate	130	Breast	117
	Lung	122	Lung	72	Lung	50
	Breast	118	Colon & Rectum	56	Colon & Rectum	49
	Colon & Rectum	105	Bladder	22	Ovary / Corpus Uteri	15 *
	Non-Hodgkin's Lymphoma	30	Non-Hodgkin's Lymphoma	18	Thyroid / Non-Hodgkin's Lymphoma	12 *
St. James	All Cancers	430	All Cancers	242	All Cancers	188
	Lung	69	Prostate	66	Breast	63
	Prostate	66	Lung	51	Colon & Rectum	24
	Breast	63	Colon & Rectum	26	Lung	18
	Colon & Rectum	50	Kidney & Renal Pelvis	12	Kidney & Renal Pelvis	11
	Kidney & Renal Pelvis	23	Pancreas / Oral Cavity & Pharynx / Bladder	9 *	Corpus Uteri	8
St. John	All Cancers	668	All Cancers	357	All Cancers	311
	Lung	117	Prostate	109	Breast	101
	Prostate	109	Lung	72	Lung	45
	Breast	103	Colon & Rectum	34	Colon & Rectum	33
	Colon & Rectum	67	Bladder	21	Cervix Uteri	16
	Bladder	30	Kidney & Renal Pelvis	14	Non-Hodgkin's Lymphoma	14

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
St. Mary	All Cancers	1,124	All Cancers	648	All Cancers	476
	Lung	191	Prostate	170	Breast	141
	Prostate	170	Lung	127	Lung	64
	Breast	143	Colon & Rectum	68	Colon & Rectum	60
	Colon & Rectum	128	Bladder	45	Corpus Uteri	20
	Bladder	58	Non-Hodgkin's Lymphoma	25	Ovary	17
Terrebonne	All Cancers	1,753	All Cancers	977	All Cancers	776
	Lung	358	Lung	256	Breast	230
	Colon & Rectum	238	Prostate	186	Lung	102
	Breast	231	Colon & Rectum	139	Colon & Rectum	99
	Prostate	186	Bladder / Non-Hodgkin's Lymphoma	51 *	Corpus Uteri	37
	Non-Hodgkin's Lymphoma	86	Kidney & Renal Pelvis	36	Non-Hodgkin's Lymphoma	35
Region 4	All Cancers	11,271	All Cancers	5,964	All Cancers	5,307
	Lung	2,071	Prostate	1,472	Breast	1,595
	Breast	1,614	Lung	1,295	Lung	776
	Prostate	1,472	Colon & Rectum	722	Colon & Rectum	587
	Colon & Rectum	1,309	Bladder	270	Corpus Uteri	210
	Non-Hodgkin's Lymphoma	408	Non-Hodgkin's Lymphoma	208	Non-Hodgkin's Lymphoma	200
Acadia	All Cancers	1,435	All Cancers	782	All Cancers	653
	Lung	254	Prostate	206	Breast	197
	Prostate	206	Lung	151	Lung	103
	Breast	200	Colon & Rectum	117	Colon & Rectum	80
	Colon & Rectum	197	Bladder	33	Corpus Uteri / Leukemias	25 *
	Bladder / Non-Hodgkin's Lymphoma	47 *	Non-Hodgkin's Lymphoma	25	Pancreas / Non-Hodgkin's Lymphoma	22 *
Evangeline	All Cancers	748	All Cancers	374	All Cancers	374
	Lung	152	Lung	92	Breast	87
	Colon & Rectum	98	Prostate	83	Lung	60
	Breast	87	Colon & Rectum	49	Colon & Rectum	49
	Prostate	83	Oral Cavity & Pharynx / Bladder	16 *	Pancreas	20
	Pancreas	34	Pancreas / Kidney & Renal Pelvis	14 *	Non-Hodgkin's Lymphoma	15

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Iberia	All Cancers	1,593	All Cancers	848	All Cancers	745
	Lung	295	Prostate	234	Breast	228
	Prostate	234	Lung	181	Lung	114
	Breast	230	Colon & Rectum	105	Colon & Rectum	76
	Colon & Rectum	181	Oral Cavity & Pharynx	33	Corpus Uteri	36
	Kidney & Renal Pelvis	56	Kidney & Renal Pelvis	32	Pancreas	33
Lafayette	All Cancers	3,347	All Cancers	1,705	All Cancers	1,642
	Lung	565	Prostate	365	Breast	545
	Beast	549	Lung	362	Lung	203
	Prostate	365	Colon & Rectum	202	Colon & Rectum	158
	Colon & Rectum	360	Bladder	83	Non-Hodgkin's Lymphoma	75
	Non-Hodgkin's Lymphoma	151	Non-Hodgkin's Lymphoma	76	Ovary	64
St. Landry	All Cancers	2,003	All Cancers	1,078	All Cancers	925
	Lung	380	Prostate	277	Breast	264
	Prostate	277	Lung	240	Lung	140
	Breast	271	Colon & Rectum	114	Colon & Rectum	112
	Colon & Rectum	226	Bladder	63	Pancreas	43
	Bladder	86	Pancreas	37	Corpus Uteri	35
St. Martin	All Cancers	886	All Cancers	492	All Cancers	394
	Lung	192	Lung	125	Breast	107
	Prostate	118	Prostate	118	Lung	67
	Colon & Rectum	116	Colon & Rectum	68	Colon & Rectum	48
	Breast	107	Bladder	20	Corpus Uteri	18
	Oral Cavity & Pharynx / Bladder	27 *	Pancreas	19	Cervix Uteri	17
Vermilion	All Cancers	1,259	All Cancers	685	All Cancers	574
	Lung	233	Prostate	189	Breast	167
	Prostate	189	Lung	144	Lung	89
	Breast	170	Colon & Rectum	67	Colon & Rectum	64
	Colon & Rectum	131	Bladder	30	Skin Melanomas	25
	Non-Hodgkin's Lymphoma	46	Kidney & Renal Pelvis	25	Corpus Uteri	23

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Region 5	All Cancers	5,906	All Cancers	3,204	All Cancers	2,702
	Lung	1,078	Prostate	860	Breast	737
	Prostate	860	Lung	667	Lung	411
	Breast	742	Colon & Rectum	332	Colon & Rectum	345
	Colon & Rectum	677	Bladder	214	Corpus Uteri	124
	Bladder	284	Non-Hodgkin's Lymphoma	128	Non-Hodgkin's Lymphoma	105
Allen	All Cancers	436	All Cancers	252	All Cancers	184
	Lung	97	Lung	65	Breast	45
	Prostate	61	Prostate	61	Lung	32
	Colon & Rectum	52	Colon & Rectum	26	Colon & Rectum	26
	Breast	46	Bladder	14	Corpus Uteri	8
	Bladder	18	Oral Cavity & Pharynx	12	Ovary / Pancreas	7 *
Beauregard	All Cancers	638	All Cancers	339	All Cancers	299
	Lung	107	Prostate	96	Breast	77
	Prostate	96	Lung	65	Lung	42
	Breast	78	Colon & Rectum	39	Colon & Rectum	34
	Colon & Rectum	73	Bladder	31	Corpus Uteri	17
	Bladder	42	Non-Hodgkin's Lymphoma	13	Cervix Uteri / Skin Melanomas	12 *
Calcasieu	All Cancers	3,975	All Cancers	2,161	All Cancers	1,814
	Lung	698	Prostate	586	Breast	501
	Prostate	586	Lung	432	Lung	266
	Breast	504	Colon & Rectum	223	Colon & Rectum	242
	Colon & Rectum	465	Bladder	141	Non-Hodgkin's Lymphoma	78
	Bladder	186	Skin Melanomas	90	Corpus Uteri	73
Cameron	All Cancers	167	All Cancers	93	All Cancers	74
	Lung	38	Lung	28	Breast	27
	Breast	27	Prostate	20	Lung	10
	Prostate	20	Bladder	7	Colon & Rectum	9
	Colon & Rectum	14	Leukemias / Pancreas / Colon & Rectum	**	Ovary	6
	Bladder	8	Skin Melanomas / Non-Hodgkin's Lymphoma/ Oral Cavity & Pharynx	**	Corpus Uteri	**

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Jefferson Davis	All Cancers	690	All Cancers	359	All Cancers	331
	Lung	138	Prostate	97	Breast	87
	Prostate	97	Lung	77	Lung	61
	Breast	87	Colon & Rectum	39	Colon & Rectum	34
	Colon & Rectum	73	Bladder	21	Corpus Uteri	23
	Bladder	30	Oral Cavity & Pharynx	14	Pancreas	15
Region 6	All Cancers	6,212	All Cancers	3,338	All Cancers	2,874
	Lung	1,155	Prostate	891	Breast	795
	Prostate	891	Lung	736	Lung	419
	Breast	806	Colon & Rectum	388	Colon & Rectum	361
	Colon & Rectum	749	Bladder	177	Non-Hodgkin's Lymphoma	128
	Bladder	237	Non-Hodgkin's Lymphoma	112	Corpus Uteri	111
Avoyelles	All Cancers	874	All Cancers	507	All Cancers	367
	Lung	163	Prostate	119	Breast	94
	Colon & Rectum	121	Lung	116	Colon & Rectum	50
	Prostate	119	Colon & Rectum	71	Lung	47
	Breast	94	Kidney & Renal Pelvis	23	Non-Hodgkin's Lymphoma	18
	Non-Hodgkin's Lymphoma	35	Bladder	22	Cervix Uteri	16
Catahoula	All Cancers	212	All Cancers	130	All Cancers	82
	Lung	42	Prostate	38	Breast	21
	Prostate	38	Lung	27	Lung	15
	Colon & Rectum	24	Colon & Rectum	11	Colon & Rectum	13
	Breast	22	Bladder	8	Pancreas	**
	Bladder	10	Non-Hodgkin's Lymphoma	6	Corpus Uteri	**
Concordia	All Cancers	355	All Cancers	174	All Cancers	181
	Lung	83	Lung	50	Breast	45
	Colon & Rectum / Breast	46 *	Prostate	42	Lung	33
	Prostate	42	Colon & Rectum	24	Colon & Rectum	22
	Pancreas	21	Pancreas	12	Corpus Uteri	11
	Leukemias / Corpus Uteri	11 *	Leukemias	**	Pancreas / Cervix Uteri	9 *

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Grant	All Cancers	385	All Cancers	212	All Cancers	173
	Lung	84	Prostate	60	Breast	56
	Prostate	60	Lung	56	Lung	28
	Breast	57	Colon & Rectum	22	Colon & Rectum	21
	Colon & Rectum	43	Bladder	10	Corpus Uteri	10
	Non-Hodgkin's Lymphoma	15	Non-Hodgkin's Lymphoma	9	Ovary	8
LaSalle	All Cancers	394	All Cancers	219	All Cancers	175
	Prostate	71	Prostate	71	Breast	44
	Lung	70	Lung	44	Lung	26
	Breast	44	Bladder	19	Colon & Rectum	19
	Colon & Rectum	37	Colon & Rectum	18	Non-Hodgkin's Lymphoma	13
	Bladder	20	Leukemias	6	Corpus Uteri	7
Rapides	All Cancers	2,794	All Cancers	1,484	All Cancers	1,310
	Lung	479	Prostate	406	Breast	398
	Prostate	406	Lung	299	Lung	180
	Breast	404	Colon & Rectum	188	Colon & Rectum	159
	Colon & Rectum	347	Bladder	74	Non-Hodgkin's Lymphoma	59
	Non-Hodgkin's Lymphoma	109	Non-Hodgkin's Lymphoma	50	Corpus Uteri	47
Vernon	All Cancers	762	All Cancers	383	All Cancers	379
	Lung	158	Lung	97	Breast	90
	Breast	91	Prostate	84	Lung	61
	Colon & Rectum	89	Colon & Rectum	38	Colon & Rectum	51
	Prostate	84	Bladder	25	Ovary	19
	Bladder	36	Non-Hodgkin's Lymphoma	18	Non-Hodgkin's Lymphoma	15
Winn	All Cancers	436	All Cancers	229	All Cancers	207
	Lung	76	Prostate	71	Breast	47
	Prostate	71	Lung	47	Lung	29
	Breast	48	Colon & Rectum	16	Colon & Rectum	26
	Colon & Rectum	42	Bladder	15	Skin Melanomas	11
	Bladder	18	Larynx	10	Non-Hodgkin's Lymphoma	10

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Region 7	All Cancers	11,847	All Cancers	6,417	All Cancers	5,430
	Prostate	2,073	Prostate	2,073	Breast	1,561
	Lung	1,936	Lung	1,242	Colon & Rectum	738
	Breast	1,575	Colon & Rectum	737	Lung	694
	Colon & Rectum	1,475	Bladder	295	Corpus Uteri	264
	Bladder	414	Oral Cavity & Pharynx	202	Non-Hodgkin's Lymphoma	206
Bienville	All Cancers	470	All Cancers	261	All Cancers	209
	Prostate	105	Prostate	105	Breast	64
	Lung	66	Lung	47	Colon & Rectum	30
	Breast	65	Colon & Rectum	25	Lung	19
	Colon & Rectum	55	Bladder	10	Corpus Uteri / Cervix Uteri	9 *
	Bladder	17	Non-Hodgkin's Lymphoma	8	Bladder	7
Bossier	All Cancers	1,866	All Cancers	1,017	All Cancers	849
	Lung	348	Prostate	305	Breast	239
	Prostate	305	Lung	222	Lung	126
	Breast	240	Colon & Rectum	114	Colon & Rectum	108
	Colon & Rectum	222	Bladder	56	Ovary	39
	Bladder	75	Kidney & Renal Pelvis / Non-Hodgkin's Lymphoma	32 *	Corpus Uteri	34
Caddo	All Cancers	5,576	All Cancers	2,934	All Cancers	2,642
	Prostate	979	Prostate	979	Breast	783
	Lung	864	Lung	530	Colon & Rectum	355
	Breast	790	Colon & Rectum	339	Lung	334
	Colon & Rectum	694	Bladder	134	Corpus Uteri	132
	Bladder	194	Oral Cavity & Pharynx	114	Non-Hodgkin's Lymphoma	97

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Claiborne	All Cancers	418	All Cancers	243	All Cancers	175
	Prostate	86	Prostate	86	Breast	60
	Breast	62	Lung	37	Lung / Colon & Rectum	22 *
	Lung	59	Colon & Rectum	30	Corpus Uteri	10
	Colon & Rectum	52	Bladder	13	Non-Hodgkin's Lymphoma	8
	Non-Hodgkin's Lymphoma	15	Kidney & Renal Pelvis	8	Cervix Uteri / Multiple Myeloma	**
DeSoto	All Cancers	668	All Cancers	365	All Cancers	303
	Prostate	121	Prostate	121	Breast	85
	Lung	110	Lung	72	Colon & Rectum	41
	Breast	86	Colon & Rectum	32	Lung	38
	Colon & Rectum	73	Bladder	23	Pancreas	17
	Bladder	32	Leukemias	11	Non-Hodgkin's Lymphoma	12
Natchitoches	All Cancers	749	All Cancers	368	All Cancers	381
	Lung	115	Prostate	100	Breast	103
	Colon & Rectum	108	Lung	71	Colon & Rectum	63
	Breast	103	Colon & Rectum	45	Lung	44
	Prostate	100	Bladder	17	Corpus Uteri	25
	Non-Hodgkin's Lymphoma / Corpus Uteri	25 *	Non-Hodgkin's Lymphoma	15	Ovary / Cervix Uteri	15 *
Red River	All Cancers	216	All Cancers	111	All Cancers	105
	Colon & Rectum	40	Prostate	27	Breast	22
	Lung	29	Colon & Rectum	20	Colon & Rectum	20
	Prostate	27	Lung	19	Lung	10
	Breast	22	Leukemias	**	Corpus Uteri / Cervix Uteri	7 *
	Corpus Uteri / Cervix Uteri	7 *	Larynx	**	Non-Hodgkin's Lymphoma	**

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Sabine	All Cancers	639	All Cancers	385	All Cancers	254
	Lung	126	Prostate	108	Breast	64
	Prostate	108	Lung	94	Colon & Rectum	37
	Colon & Rectum	78	Colon & Rectum	41	Lung	32
	Breast	64	Bladder	16	Non-Hodgkin's Lymphoma	13
	Non-Hodgkin's Lymphoma	22	Oral Cavity & Pharynx	14	Corpus Uteri	11
Webster	All Cancers	1,245	All Cancers	733	All Cancers	512
	Prostate	242	Prostate	242	Breast	141
	Lung	219	Lung	150	Lung	69
	Colon & Rectum	153	Colon & Rectum	91	Colon & Rectum	62
	Breast	143	Bladder	25	Non-Hodgkin's Lymphoma / Corpus Uteri	26 *
	Non-Hodgkin's Lymphoma	47	Skin Melanomas	23	Cervix Uteri / Ovary	20 *
Region 8	All Cancers	8,345	All Cancers	4,518	All Cancers	3,827
	Lung	1,524	Prostate	1,319	Breast	1,098
	Prostate	1,319	Lung	1,000	Lung	524
	Breast	1,114	Colon & Rectum	449	Colon & Rectum	483
	Colon & Rectum	932	Bladder	189	Corpus Uteri	181
	Skin Melanomas	278	Skin Melanomas	161	Non-Hodgkin's Lymphoma	126
Caldwell	All Cancers	274	All Cancers	160	All Cancers	114
	Lung	61	Lung	40	Breast	27
	Colon & Rectum	39	Prostate	34	Lung	21
	Prostate	34	Colon & Rectum	19	Colon & Rectum	20
	Breast	28	Oral Cavity & Pharynx	10	Non-Hodgkin's Lymphoma	7
	Non-Hodgkin's Lymphoma	12	Bladder	7	Cervix Uteri	**

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
East Carroll	All Cancers	248	All Cancers	146	All Cancers	102
	Prostate	50	Prostate	50	Breast	33
	Lung	46	Lung	31	Lung	15
	Breast	33	Colon & Rectum	19	Colon & Rectum	10
	Colon & Rectum	29	Oral Cavity & Pharynx	7	Cervix Uteri / Kidney & Renal Pelvis	7 *
	Kidney & Renal Pelvis	10	Skin Melanomas / Bladder	**	Pancreas	**
Franklin	All Cancers	550	All Cancers	302	All Cancers	248
	Lung	102	Prostate	91	Breast	57
	Prostate	91	Lung	64	Lung	38
	Breast	57	Colon & Rectum	32	Colon & Rectum	23
	Colon & Rectum	55	Pancreas / Bladder	12 *	Pancreas	19
	Pancreas	31	Leukemias	9	Corpus Uteri	11
Jackson	All Cancers	476	All Cancers	256	All Cancers	220
	Prostate	89	Prostate	89	Breast	62
	Lung	77	Lung	48	Lung	29
	Breast	63	Bladder	17	Colon & Rectum	26
	Colon & Rectum	42	Colon & Rectum	16	Cervix Uteri	13
	Bladder	20	Skin Melanomas	10	Corpus Uteri / Pancreas	11 *
Lincoln	All Cancers	883	All Cancers	472	All Cancers	411
	Lung	145	Prostate	137	Breast	131
	Prostate	137	Lung	97	Lung	48
	Breast	132	Colon & Rectum	40	Colon & Rectum	47
	Colon & Rectum	87	Skin Melanomas	29	Corpus Uteri	28
	Skin Melanomas	53	Bladder	25	Skin Melanomas	24

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Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Madison	All Cancers	214	All Cancers	113	All Cancers	101
	Lung	38	Prostate	31	Breast	28
	Prostate	31	Lung	25	Colon & Rectum	14
	Breast	28	Colon & Rectum / Esophagus / Stomach	9 *	Lung	13
	Colon & Rectum	23	Pancreas / Non-Hodgkin's Lymphoma / Leukemias	**	Pancreas	**
	Esophagus / Stomach	12 *	Bladder / Larynx	**	Non-Hodgkin's Lymphoma / Cervix Uteri / Kidney & Renal Pelvis	**
Morehouse	All Cancers	796	All Cancers	429	All Cancers	367
	Prostate	140	Prostate	140	Breast	116
	Lung	135	Lung	91	Colon & Rectum	49
	Breast	119	Colon & Rectum	40	Lung	44
	Colon & Rectum	89	Bladder	16	Corpus Uteri	14
	Bladder	28	Non-Hodgkin's Lymphoma	15	Pancreas / Bladder / Non-Hodgkin's Lymphoma	12 *
Ouachita	All Cancers	3,202	All Cancers	1,682	All Cancers	1,520
	Lung	583	Prostate	475	Breast	447
	Prostate	475	Lung	361	Lung	222
	Breast	453	Colon & Rectum	180	Colon & Rectum	191
	Colon & Rectum	371	Bladder	73	Corpus Uteri	77
	Non-Hodgkin's Lymphoma	112	Skin Melanomas	65	Non-Hodgkin's Lymphoma	50
Richland	All Cancers	598	All Cancers	343	All Cancers	255
	Lung	121	Prostate	95	Breast	68
	Prostate	95	Lung	86	Lung	35
	Breast	70	Colon & Rectum	24	Colon & Rectum	33
	Colon & Rectum	57	Bladder	16	Corpus Uteri	15
	Skin Melanomas / Non-Hodgkin's Lymphoma	21 *	Leukemias	14	Ovary	11

* Number of cases is the same at each site.

** Contents of cells containing five or fewer cases are suppressed for reasons of confidentiality.

Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Tensas	All Cancers	141	All Cancers	81	All Cancers	60
	Lung	36	Prostate	32	Breast	14
	Prostate	32	Lung	24	Lung	12
	Colon & Rectum	20	Colon & Rectum	9	Colon & Rectum	11
	Breast	14	Leukemias	**	Bladder	**
	Leukemias	**	Larynx	**	Multiple Myeloma / Corpus Uteri	**
Union	All Cancers	619	All Cancers	329	All Cancers	290
	Lung	119	Prostate / Lung	84 *	Breast	81
	Prostate / Colon & Rectum	84 *	Colon & Rectum	40	Colon & Rectum	44
	Breast	83	Oral Cavity & Pharynx	20	Lung	35
	Skin Melanomas	24	Stomach / Skin Melanomas	11 *	Ovary	14
	Oral Cavity & Pharynx	23	Non-Hodgkin's Lymphoma / Leukemias	8 *	Skin Melanomas	13
West Carroll	All Cancers	344	All Cancers	205	All Cancers	139
	Prostate / Lung	61 *	Prostate	61	Breast	34
	Colon & Rectum	36	Lung	49	Colon & Rectum	15
	Breast	34	Colon & Rectum	21	Lung	12
	Non-Hodgkin's Lymphoma	15	Oral Cavity & Pharynx	12	Non-Hodgkin's Lymphoma	10
	Oral Cavity & Pharynx / Bladder	13 *	Bladder	9	Corpus Uteri	8
Region 9	All Cancers	8,038	All Cancers	4,369	All Cancers	3,669
	Lung	1,468	Prostate	1,269	Breast	1,124
	Prostate	1,269	Lung	929	Lung	539
	Breast	1,136	Colon & Rectum	461	Colon & Rectum	428
	Colon & Rectum	889	Bladder	229	Non-Hodgkin's Lymphoma	161
	Non-Hodgkin's Lymphoma	318	Kidney & Renal Pelvis	172	Corpus Uteri	144

* Number of cases is the same at each site.

** Contents of cells containing five or fewer cases are suppressed for reasons of confidentiality.

Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Livingston	All Cancers	1,490	All Cancers	801	All Cancers	689
	Lung	313	Prostate	232	Breast	193
	Prostate	232	Lung	186	Lung	127
	Breast	196	Colon & Rectum	68	Colon & Rectum	83
	Colon & Rectum	151	Bladder	47	Non-Hodgkin's Lymphoma	27
	Bladder	63	Kidney & Renal Pelvis	28	Corpus Uteri	22
St. Helena	All Cancers	117	All Cancers	76	All Cancers	41
	Prostate	29	Prostate	29	Breast	15
	Lung	24	Lung	18	Lung	6
	Breast	15	Colon & Rectum	9	Colon & Rectum	**
	Colon & Rectum	13	Larynx	**	Larynx / Multiple Myeloma	**
	Larynx	**	Multiple Myeloma / Esophagus / Non-Hodgkin's Lymphoma	**	Kidney & Renal Pelvis / Bladder / Corpus Uteri / Pancreas / Liver / Oral Cavity & Pharynx / Cervix Uteri / Hodgkin's Disease	**
St. Tammany	All Cancers	3,396	All Cancers	1,832	All Cancers	1,564
	Lung	561	Prostate	538	Breast	522
	Prostate	538	Lung	343	Lung	218
	Breast	527	Colon & Rectum	186	Colon & Rectum	166
	Colon & Rectum	352	Bladder	106	Non-Hodgkin's Lymphoma	80
	Non-Hodgkin's Lymphoma	163	Kidney & Renal Pelvis	87	Ovary	69
Tangipahoa	All Cancers	1,871	All Cancers	1,019	All Cancers	852
	Lung	350	Prostate	286	Breast	245
	Prostate	286	Lung	230	Lung	120
	Breast	246	Colon & Rectum	135	Colon & Rectum	105
	Colon & Rectum	240	Bladder	41	Non-Hodgkin's Lymphoma / Corpus Uteri	33 *
	Non-Hodgkin's Lymphoma	61	Oral Cavity & Pharynx	37	Ovary	32

* Number of cases is the same at each site.

** Contents of cells containing five or fewer cases are suppressed for reasons of confidentiality.

Top Five Cancers And Number Of Cases Diagnosed In Louisiana By Region And Parish, 1994-1998

Region/Parish	Total		Males		Females	
Washington	All Cancers	1,164	All Cancers	641	All Cancers	523
	Lung	220	Prostate	184	Breast	149
	Prostate	184	Lung	152	Colon & Rectum	70
	Breast	152	Colon & Rectum	63	Lung	68
	Colon & Rectum	133	Bladder	34	Corpus Uteri	25
	Bladder	46	Kidney & Renal Pelvis	23	Pancreas / Non-Hodgkin's Lymphoma	21 *

* Number of cases is the same at each site.

** Contents of cells containing five or fewer cases are suppressed for reasons of confidentiality.

Source: Louisiana Tumor Registry

F. CHRONIC DISEASE—BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS)

Behavior-related illness and injury, such as heart disease, cancer, cerebrovascular disease, and motor vehicle-related injuries result in the premature death or compromised lifestyle of thousands of Louisiana residents each year. Most of the adults in the state report that they engage in at least one health behavior that place them at an increased, but avoidable, risk for these outcomes.

Prevention of illness before it occurs is a central aspect of the public health system. Achievement of this goal requires an understanding of the risk factors that lead to illness and of the behaviors that put an individual at risk of illness. The goal of primary prevention programs is to reduce or prevent initiation of behaviors, such as smoking, alcohol use, sedentary lifestyles, and poor eating habits, known to be associated with chronic disease. The goal of secondary prevention is to reduce or delay chronic illnesses and deaths through the early identification and treatment of persons with early signs/symptoms of diseases, by promoting the use of scientifically validated screening exams for early detection of certain cancers, hypertension, breast cancer, and diabetes.

To collect information needed by its primary and secondary prevention programs, the Louisiana OFFICE OF PUBLIC HEALTH CHRONIC DISEASE CONTROL PROGRAM, in cooperation with the CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC), began in 1991 to participate in the Behavioral Risk Factor Surveillance System (BRFSS). The purpose of the BRFSS is to provide state-level prevalence data on health-related behaviors and attitudes. Information collected in the survey is being used in the state's ongoing effort to plan, develop, and evaluate health promotion and disease prevention programs. Data from the BRFSS are also used to monitor progress toward achieving the national objectives of the Healthy People 2000 program of the United States Department of Health and Hospitals (USDHHS, 1990).

Adults ages 18 years and older who do not live in institutions such as geriatric centers, hospitals, jail, or prison may be included in the BRFSS. Some survey questions are asked each year and some are asked on alternating years. The following information, representing non-institutionalized Louisiana adult residents ages 18 and older, are from the most recent BRFSS that collected the specified data.

BRFSS: Tobacco Use

Cigarette Smoking

Tobacco use is responsible for more than 430,000 deaths among adults annually in the United States, accounting for a number greater than deaths due to alcohol, motor vehicle injuries, suicides, AIDS, homicide, illegal drugs, and firearms combined. With current trends continuing, it is estimated that more than 5 million years of potential life will be lost and will cost in excess of $50 billion per year in direct medical costs.

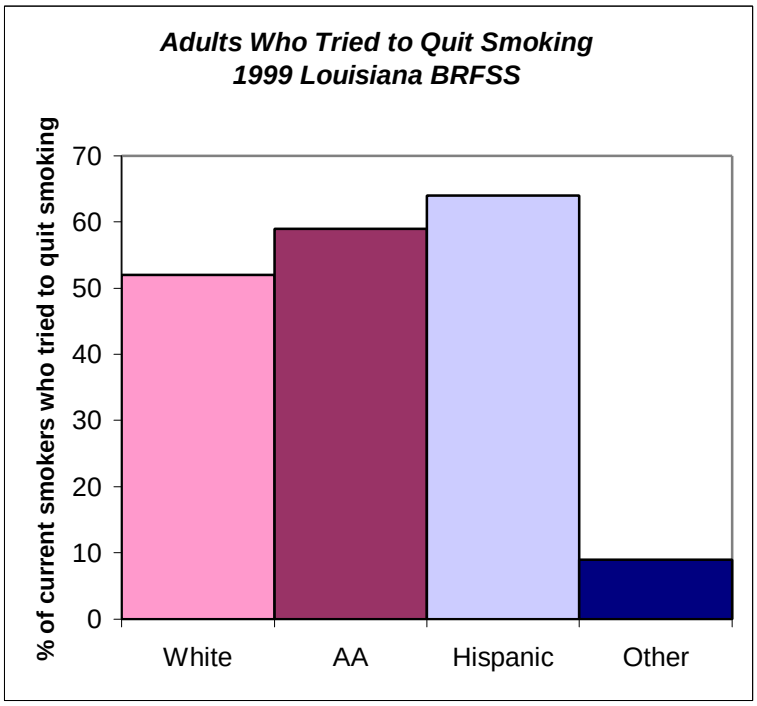
Adults:

i. Current Smokers*:* In 1999, according to BRFSS results, approximately one in four adult Louisianans was a current smoker and is at risk of developing smoking related illnesses which include heart disease, lung cancer, cancer of pancreas, kidney, and cervix.

Demographic Profile of Current Smokers 1999 Louisiana BRFSS									
Age	% Who Currently Smoke	Sex	% Who Currently Smoke	Race	% Who Currently Smoke	Income	% Who Currently Smoke	Education	% Who Currently Smoke
18-24	29.1	Male	26.8	White	24.7	Less than $15,000	30.7	Less than H.S.	28.2
25-34	27.1	Female	20.6	African American	19.6	$15,000-$24,999	25.0	H.S. or G.E.D.	27.5
35-44	29.4			Hispanic	28.6	$25,000-$34,999	24.3	Some post-H.S.	24.3
45-54	21.8					$35,000-$49,999	25.4	College Graduate	12.9
55-64	22.9					$50,000+	19.2		
65+	9.6								

Source: Louisiana Office of Public Health, Chronic Diseases Control Program, 1999 BRFSS

***ii. Cessation**:* Among current smokers, according to 1999 BRFSS results, 53% attempted to quit smoking for one or more days during the twelve months preceding the survey. Males (56%) were more likely to attempt to quit smoking compared to females. Other groups more likely to attempt to quit smoking included the 18-24 year age group (77%), African Americans (59%) and individuals with a high school or G.E.D. level of education (57%).



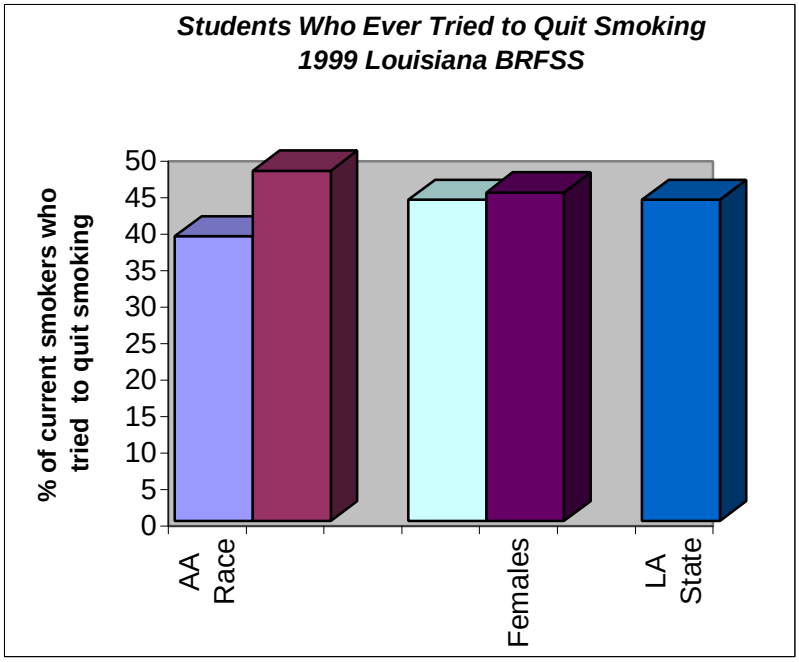
Source: Louisiana Office of Public Health, Chronic Diseases Control Program, 1999 BRFSS

Youth:

i. Current Smokers: Approximately 100,000 youth in Louisiana are projected to die prematurely due to smoking (State Tobacco Control Highlights 1999). More than a fourth (27.3%) of students in Louisiana smoked a whole cigarette for the first time before the age of 13, with a higher prevalence among white males (Department of Education, YRBSS 1997).

Lifetime prevalence of cigarette use for Louisiana students ranges from 27% in the 6th grade to a high of 64% in the 12th grade. Twenty two percent of Louisiana students reported using cigarettes in the past 30 days and 30% of the youth reported that they got their cigarettes from a store or gas station (Communities That Care Survey 1999, Office of Addictive Disorders).

ii. Cessation: According to 1997 YRBSS data, approximately 44% of the 9th – 12th graders who currently smoke have tried to quit at least once. White teenagers (48%) were more likely to try quitting compared to African Americans (39%), while the rates were nearly equal for both males (44%) and females (45%). Teenagers in the 9th grade (47%) were more likely to try quitting compared to 12th graders (42%).



Source: Louisiana Office of Public Health, Chronic Diseases Control Program, 1999 BRFSS

Pregnant Women

Evidence shows that maternal tobacco use is associated with mental retardation, low birth weight and birth defects such as oral clefts. In Louisiana, according to LAPRAMS data in 1998, 14% of the women reported smoking during the last trimester of their pregnancy, with the rates higher in white women and in women with less than high school education.

Smokeless Tobacco

The link between occurrence of oral cancer and the use of smokeless tobacco, snuff, and chewing tobacco has been clearly documented; the available research shows that snuff use increases the risk of oral cancer among nonsmokers four-fold. Among chronic snuff users the excess risk of cancer of the gum and buccal mucosa reaches nearly fifty-fold. In the United

States, more than 30,000 cases a year of oral cancer are attributed to the use of smokeless tobacco.

According to 1999 BRFSS results, 14% of adult population ever used smokeless tobacco and was higher in males (27%) compared to females (2.1%). Four percent of adults in Louisiana currently use smokeless tobacco and are therefore at risk for illnesses related to smokeless tobacco use.

Demographic Profile of Current Smokeless Tobacco Users 1999 Louisiana BRFSS

Gender	% Who Currently Use Smokeless Tobacco	Age	% Who Currently Use Smokeless Tobacco	Education	% Who Currently Use Smokeless Tobacco
Male	8.5	18-24	7.6	Less than H.S.	1.6
Female	0.1	25-34	5.9	H.S. or E.D.	5.1
		35-44	4.9	Some post H.S.	4.1
		45-54	1.8	College graduate	4.2
		55-64	1.6		
		65+	2.0		

Source: Louisiana Office of Public Health, Chronic Diseases Control Program, 1999 BRFSS

Secondhand Smoke

Environmental Tobacco Smoke (ETS) or Secondhand Smoke kills more than 53,000 deaths annually in the United States. Secondhand smoke is a proven cause of respiratory problems in nonsmokers. Secondhand smoke causes 30 times as many lung cancer deaths as all regulated air pollutants combined. An estimated number of 294,892 Louisiana youth were exposed to environmental tobacco smoke in their homes in 1996. (http://www.cdc.gov/tobacco/statehi/htmltext/la_sh.htm).

Smoking and Insurance

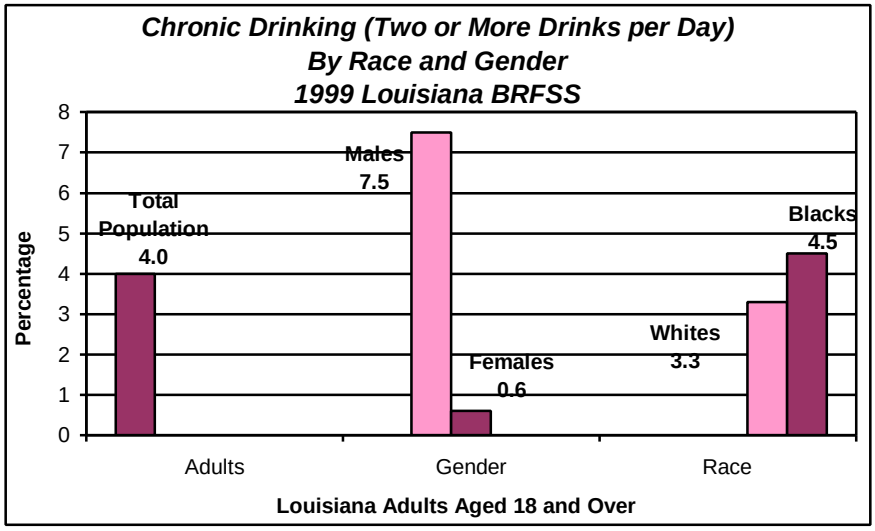
Persons on Medicaid and with no health insurance have higher rates of current smoking that with persons with private insurance. Since almost half of Louisiana residents are on Medicaid or have no health insurance, it likely that the state bears close to half of all direct medical care costs due to tobacco through Medicaid or indigent care (SAMMEC 1994).

BRFSS: Alcohol Use

Health and social problems associated with heavy, chronic, and binge drinking are well recognized. Liver diseases are associated with chronic alcohol abuse, and fatal motor vehicle accidents are associated with heavy chronic and binge drinking. Chronic drinking is defined as two or more drinks daily for thirty days or at least sixty drinks per month. Binge drinking is defined as five or more drinks on one or more occasions within thirty days.

Based on the 1999 BRFSS, approximately 15.0% of the Louisiana adult population reported at least one episode of binge drinking in the thirty days prior to the survey. Men (24.8%) were four times more likely to engage in binge drinking than women (6.4%) were. Whites (16.0%) were more likely to report binge drinking than Blacks (11.1%). The prevalence of binge drinking decreased with increasing age.

Approximately 4.0% of adult Louisianians reported that they consumed at least two alcoholic drinks each day of the month prior to the survey. Males (7.5%) were more likely than females (0.6%) to report chronic alcohol use. Whites (3.3%) were less likely than Blacks (4.5%) to report chronic alcohol use.



Source: Louisiana Office of Public Health, Chronic Diseases Control Program, 1999 BRFSS

Drinking and Driving

Many studies suggest that automobile crashes in which alcohol plays a role tend to be much more severe than other crashes. Nationally, alcohol plays a role in about 20% of crashes involving serious injury to driver or passenger, about 50% of all fatal crashes, and about 60% of single-vehicle fatal crashes. Estimates place the number of deaths in the United States attributed to alcohol-related motor vehicle crashes at over 22,000.

Of those who indicated they had consumed alcohol in the month prior to the survey, 4.8% indicated that on at least one occasion they had driven when they had had too much to drink.

BRFSS: Nutrition and Exercise

Nutrition and exercise are important to good health overall and are related to weight or body fatness. Increases in body fatness are associated with high blood pressure, diabetes, coronary heart disease, and atherosclerosis. Additionally, high fat, low fiber diets are associated with various types of cancer.

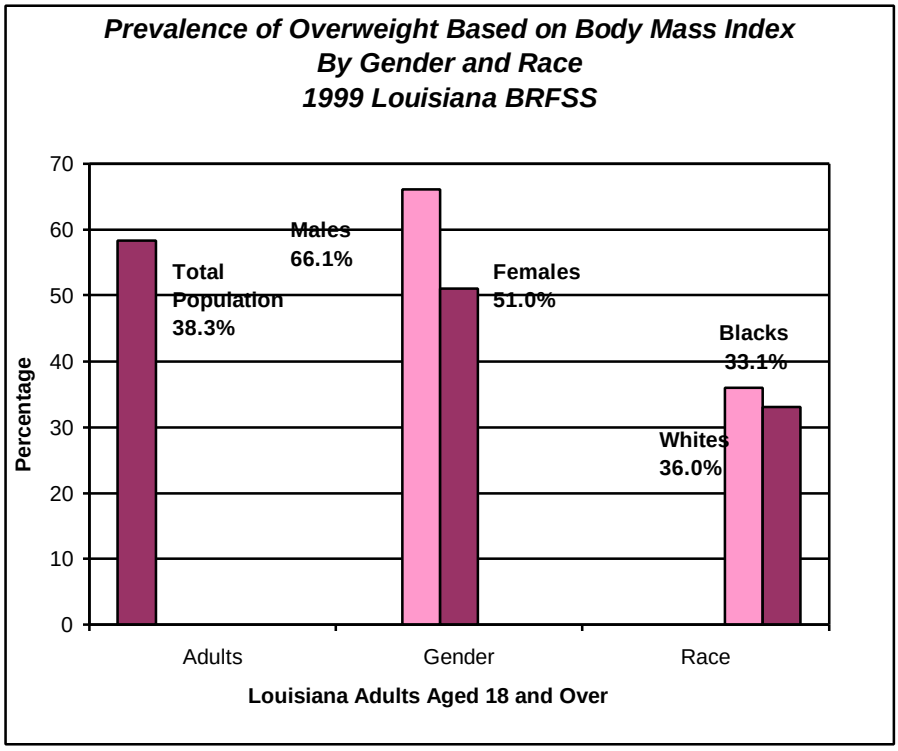
Overweight

The Body Mass Index (BMI) is a measure of body fatness derived from height and weight. A BMI of 25.0 or greater is considered overweight. A BMI of 30.0 or greater is considered obese.[3]

Over half (58.3%) of Louisiana adults are overweight. With increasing age, there is a general trend toward increasing prevalence of overweight. Males (66.1%) were more likely than females (51.0%) to be overweight. Whites (36.0%) were more likely than Blacks (33.1%) to be overweight, although Blacks (28.6%) were more likely than Whites (18.9%) to be obese. With age, prevalence increases up to age 65 years. Interestingly, Americans overall are not eating

[3] National Center for Health Statistics. *Healthy People 2000 Review, 1997*. Hyattsville, Maryland: Public Health Service. 1997.

many more calories. The weight increases are tied more directly to a marked decline in physical activity.



Source: Louisiana Office of Public Health, Chronic Diseases Control Program, 1999 BRFSS

Fruit and Vegetable Consumption

The National Academy of Sciences, the U.S. Department of Agriculture, the U.S. Department of Health and Human Services, the American Cancer Society and the National Cancer Institute specify in their dietary guidelines for fiber intake that at least five servings of fruit and vegetables per day are consistent with the maintenance of good health and cancer prevention.

According to the 1998 BRFSS data, 83% of adults in Louisiana reported not eating at least 5 servings of fruit and vegetables per day.

Physical Activity

The Surgeon General's report *Physical Activity and Health*[4] concluded that individuals of all ages who engage in regular physical activity have a lower mortality rate than individuals with sedentary lifestyles. While higher levels of fitness have greater health benefits, studies suggest that even moderate amounts of activity are beneficial. New research indicates that thirty minutes of moderate physical activity, even if broken into three ten-minute episodes, convey significant health benefits. Increases in physical activity are associated with decreases in body fatness, lowering of blood pressure, and increased glucose tolerance.

[4] U.S. Department of Health and Human Services. *Physical Activity and Health: A Report of the Surgeon General.* Atlanta, GA. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 1996.

Persons who report no physical activity outside of work are classified as sedentary. According to the 1998 BRFSS data, 83.9% of Louisiana adults is physically inactive; that is, they had not been involved in leisure time physical activities in the month preceding the survey. The prevalence of sedentary lifestyles was similar for males (82.2%) and females (85.4%).

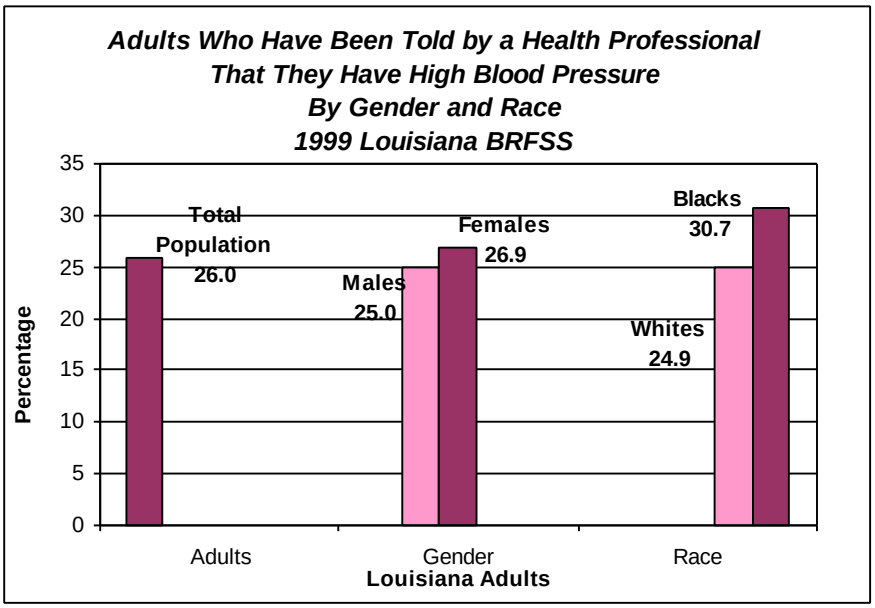
BRFSS: Health Status

Overall, the health status of the adult population may be reflected in the chronic disease burden. Chronic diseases of public health importance (i.e. diseases that are among the leading causes of death, that have high economic and disability impact, etc.) include hypertension, high cholesterol, and diabetes. The goal of public health with regard to these diseases is early detection through periodic screening and treatment.

High Blood Pressure (Hypertension)

High blood pressure is associated with increased risk for stroke, kidney failure, and coronary heart disease. Blood pressure tends to increase with age and can be affected by weight gain, physical inactivity, and, to a lesser extent, diet. Blood pressure should be checked periodically; individuals with high levels (greater than 140/90 mm Hg) recorded more than once should be referred for treatment.

Approximately one out of every four Louisianians (26%), have been told by a health professional that they have high blood pressure. While there were no significant differences regarding gender, a large differential exists between races; 24.9% of Whites and 30.7% of Blacks indicated they were ever told that they had high blood pressure.

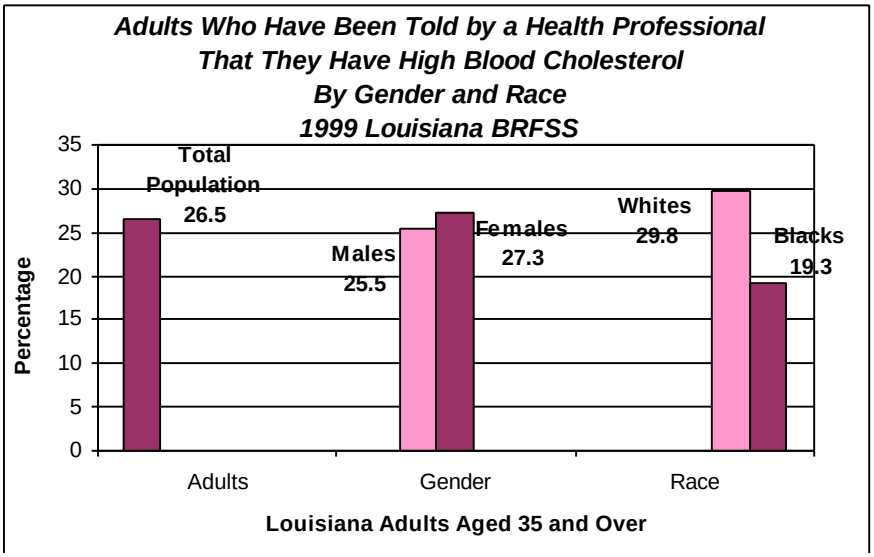


Source: Louisiana Office of Public Health, Chronic Diseases Control Program, 1999 BRFSS

High Cholesterol

High blood cholesterol is one of the major modifiable risk factors for coronary heart disease. It has been estimated that each 1% reduction in blood cholesterol levels results in a 2% reduction in the risk for heart disease.

One in four (26.5%) Louisiana adults indicated that a physician or nurse had told him that he had high blood cholesterol. Approximately 25.5% of males and 27.3% of females indicated they had been told by a health professional that they had high cholesterol.



Source: Louisiana Office of Public Health, Chronic Disease Control Program, 1999 BRFSS

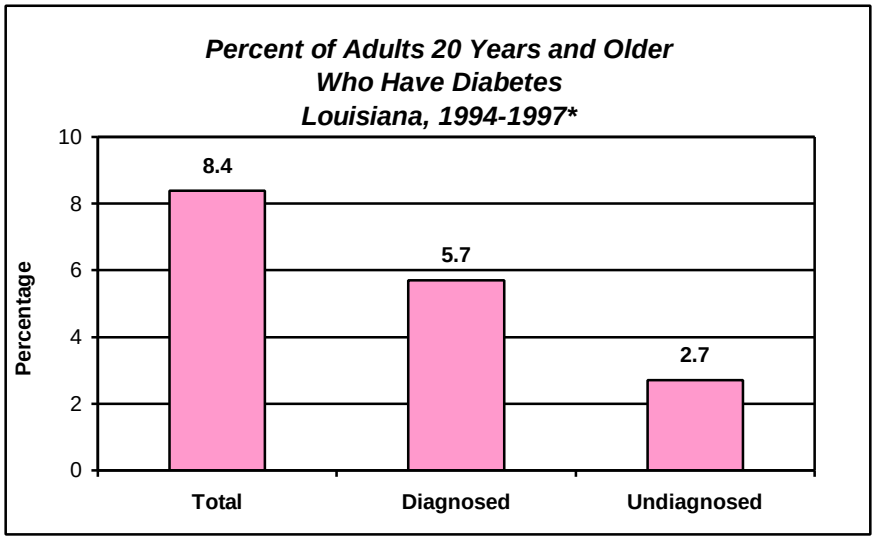
Diabetes

Diabetes is a complex, serious, and increasingly common disease. It is characterized by inappropriate high glucose level in the blood, resulting from inadequate insulin production, inability of the body to use insulin, or both. Insulin is a hormone secreted by the pancreas that allows glucose to enter body cells and to be converted to energy, protein, and fat. Persons who are obese, physically inactive, or members of ethnic minorities (African-Americans, Hispanic/Latino Americans, and American Indians) and those with family history of diabetes or prior gestational diabetes are at a higher risk of acquiring diabetes.

Diabetes is the most common cause of non-traumatic amputations and end-stage renal disease and the leading cause of blindness in adults aged 20 to 74. In 1993, in Louisiana, diabetes caused an estimated 276 new cases of blindness, 1,162 lower extremity amputations, 417 new cases of end-stage kidney disease and 66,965 diabetes-related hospitalizations. The annual direct and indirect costs from diabetes in Louisiana exceed $2 billion dollars.

Diabetes affects about 16 million Americans or 6% of the population of the United States. In 1994, Louisiana ranked second in the United States in self-reported prevalence of diagnosed diabetes.

An estimated 365,000 or 8.4% (5.7% diagnosed and 2.7% undiagnosed diabetes) of Louisiana residents 20 years and older have diabetes. Of the persons with diabetes, 32% or 115,000 are undiagnosed or unaware that they have diabetes and are therefore not receiving recommended treatment to prevent or delay the onset of complications. Over a million additional persons may be at increased risk for diabetes because of the risk factors of age, obesity, and sedentary lifestyle.



*Louisiana BRFSS aggregated for 1994-1997 for diagnosed and NHANES III for undiagnosed diabetes

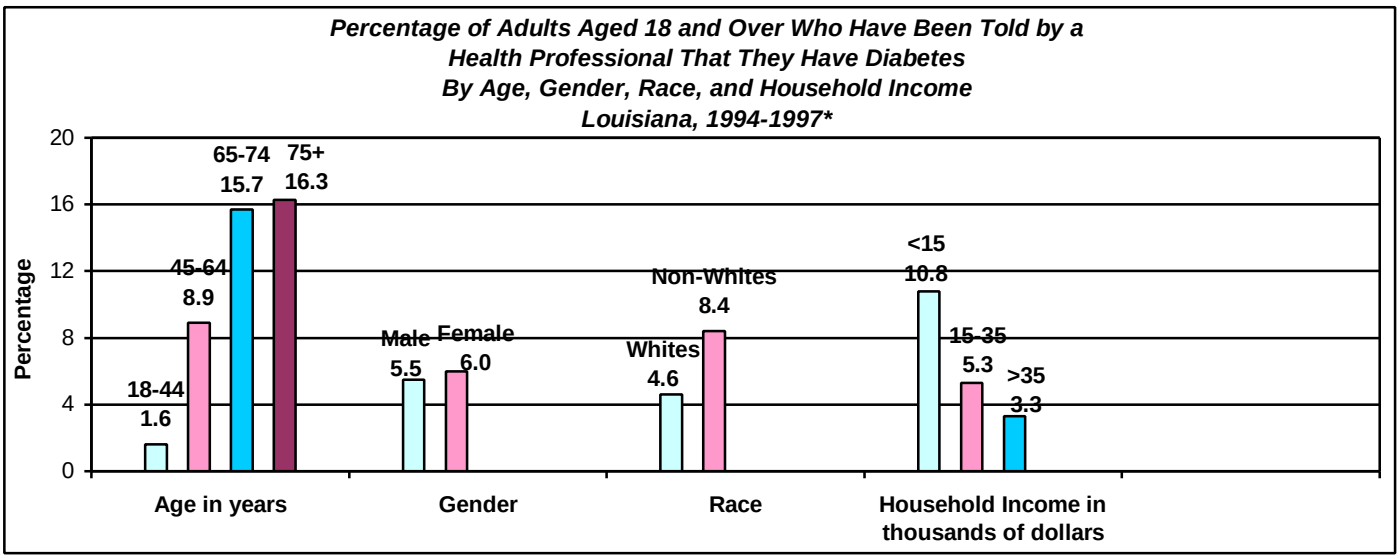
Source: Louisiana Office of Public Health, Chronic Disease Control Program

In 1998, in-depth analysis of diabetes in Louisiana was performed using the most current available information. Data were compiled from the Louisiana BRFSS 1994-1997 interviews and the National Health and Nutrition Survey (NHANES III) conducted by the U.S. Centers for Disease Control. Analysis showed no statistically significant difference between females and males or among regions in Louisiana in self-reported risk of being diagnosed with diabetes. The prevalence of diabetes, however, increased as age increased, with the lowest rate of 1.6% in the 18 to 44 age group and the highest rate of 16.3% in 75+ age group. Persons older than 44 years were 7.4 times more likely to be diagnosed with diabetes as compared with persons less than 44 years of age.

Four point six percent of Whites and 8.4% of African-Americans reported having been diagnosed with diabetes. That is, the risk of being diagnosed with diabetes among African-Americans was 1.8 times higher than the risk among Whites. The prevalence of diabetes decreased with increasing household income. Individuals living in households with income less than $15,000 a year had the highest prevalence --10.8% -- while those living in households with annual incomes ranging from $15,000 to $35,000 and those above $35,000 had rates of 5.3% and 3.3% respectively. In other words, the risk of being diagnosed with diabetes among persons with household income of less than or equal to $15,000 was 2.3 times higher compared with the risk among households with an annual income of over $15,000. Of the persons with diabetes, 55% were females, 84% were over 44 years of age (mean age of 61 years), 56% were white, 33% had a household income of less than $15,000, 33% were employed, and 41% were retired.

Diabetes is a risk factor for coronary heart disease and stroke. In fact, of the persons with diabetes in 1997, 13% were told they had coronary artery disease and 10% that they had had a stroke. Persons with diabetes are at even higher risk for cardiovascular disease morbidity and

mortality because of the co-existence of other independent risk factors for cardiovascular disease. Fifty-one percent of persons with diabetes were found to be overweight based on body mass index, 29% were self-reported current smokers, 50% were told they have high blood pressure, and 38% were told they have high cholesterol. In addition, 68% reported no leisure time physical activity and 76% reported consuming less than the recommended five servings of fruit and vegetables a day.



*Louisiana BRFSS aggregated for 1994-1997

Source: Louisiana Office of Public Health, Chronic Disease Control Program

Diabetes is a common and serious disease in Louisiana. It is a costly disease not only in terms of the economic burden it imposes on the state but also in terms of the human suffering inflicted by the disease and its complications. At least 365,000 or 8.4% of Louisiana residents 20 years and older have diabetes. The prevalence of diabetes will continue to increase if the following trends continue: increase in the prevalence of obesity, aging of the population, growth in minority populations, and persistence of socioeconomic gaps. Persons older than 44 years of age, African-Americans, and individuals with household incomes of less than $15,000 are at higher risk of having diagnosed diabetes.

Diabetes surveillance should continue in order to identify high-risk groups, to monitor health outcomes and indicators of the quality of health care recommended for people with diabetes, to provide data to formulate health care policy, and to evaluate progress in disease prevention and control.

There is a need to develop effective intervention strategies to reduce the burden of diabetes. Much of the diabetes burden can be prevented with better education for diabetes self-management, early detection and treatment of complications, and improved delivery and quality of care with intensified efforts focused at high risk groups including the elderly, African-Americans, and the poor. Primary prevention through promotion of healthy behaviors that reduce obesity, such as proper nutrition and regular physical activity, and secondary prevention of diabetes complications via better clinical preventive services, including regular foot exams, dilated eye exams, and improved blood glucose control, will go far in reducing the diabetes burden.

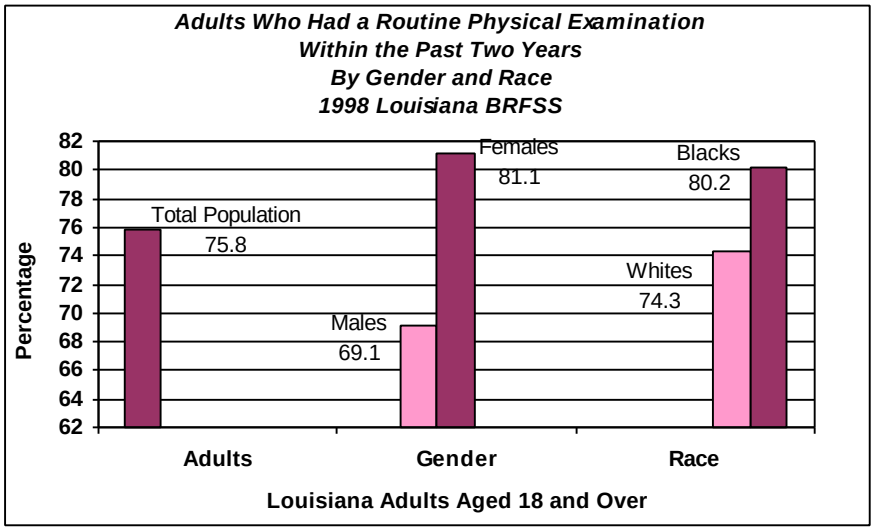
To reduce the burden of diabetes and diabetes complications, there is a need to develop new partnerships and to strengthen existing ones with private health care providers, appropriate governmental, voluntary, professional, and academic institutions and payers including Medicaid, managed care organizations, insurers, and employers. Because of the overlap in risk factors and intervention strategies, and programs for diabetes, cardiovascular and cerebrovascular diseases, and some cancers, prevention and control efforts need to be integrated and coordinated among several of the existing programs in chronic diseases within and outside the OFFICE OF PUBLIC HEALTH.

BRFSS: Preventive Health Care

Routine Medical Examinations

The routine medical examination gives the physician an opportunity to assess the general health status of patients, to assess the need for screening, and to counsel patients regarding perceived issues that affect the patient's health. Thus, it is the prime opportunity to practice preventive care.

In the 1998 BRFSS, 75.8% of the respondents had a routine checkup within the last year. Women (81.1%) were more likely than men (69.1%) to have had a routine checkup within the past two years. Blacks (80.2%) were more likely than Whites (74.3%) to have had a routine checkup within the last year.

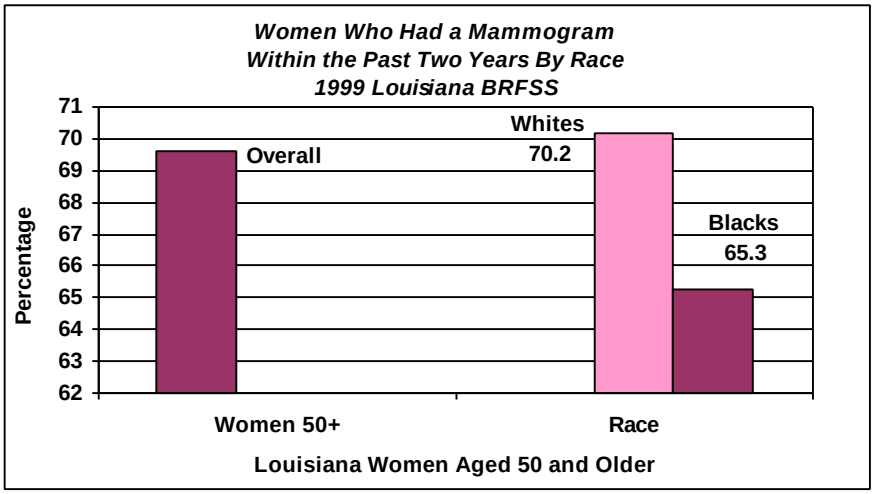


Source: Louisiana Office of Public Health, Chronic Disease Control Program, 1998 BRFSS

Mammography

Among women, breast cancer is the most commonly diagnosed cancer. Routine breast examinations by a health professional, or clinical breast examination and mammography are the most effective ways of detecting breast cancer early and improving the chances of survival. The National Cancer Institute, the American Cancer Society, and the United States Department of Health and Human Services recommend that women have a mammogram each year beginning at age 50. There is some controversy about the benefits of screening younger women.

In the 1999 BRFSS, among Louisiana women aged 50 and older, 69.6% reported they had had a mammogram within the two years before the survey. Blacks (65.3%) were less likely than Whites (70.2%) to report that they had a mammogram within the last two years.



Source: Louisiana Office of Public Health, Chronic Disease Control Program, 1999 BRFSS

Pap Smear

A Pap smear is used to obtain a sample of cervical cells to be evaluated for dysplasia or cervical cancer. The American Cancer Society recommends annual Pap tests for all women who are or have been sexually active or who have reached age 18. Once three annual Pap smears have been normal, the test can be done every three years unless a physician recommends more frequent testing.

Among women who had an intact uterus (had not had a hysterectomy), 85.4% had had a Pap smear within the past two years. There was no difference between races.

BRFSS: Medical Care Coverage

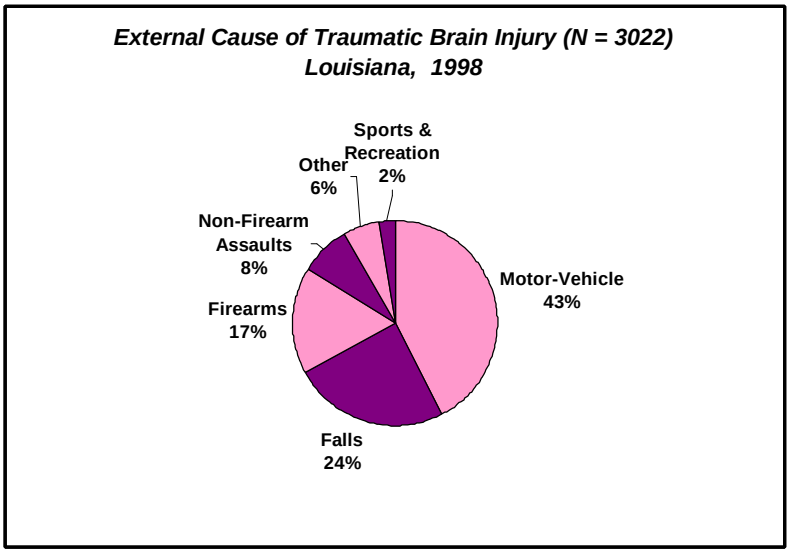
Availability of health care coverage is a crucial component in an individual's access to health care. An important Year 2000 Health Objective for the nation is to "improve financing and delivery of clinical preventive services so that virtually no American has a financial barrier to receiving, at a minimum, the screening, counseling, and immunization services recommended by the U.S. Preventive Services Task Force." Individuals without medical coverage, and even some individuals with coverage (underinsured), may not receive health care due to the cost of care. Therefore, measures of utilization of health care, including routine checkups, are dependent on coverage. The BRFSS assesses health care coverage by asking about private insurance, prepaid plans (HMOs), or Medicare.

Louisiana consistently has higher rates of adults with no health care coverage compared with the United States adult population at large.

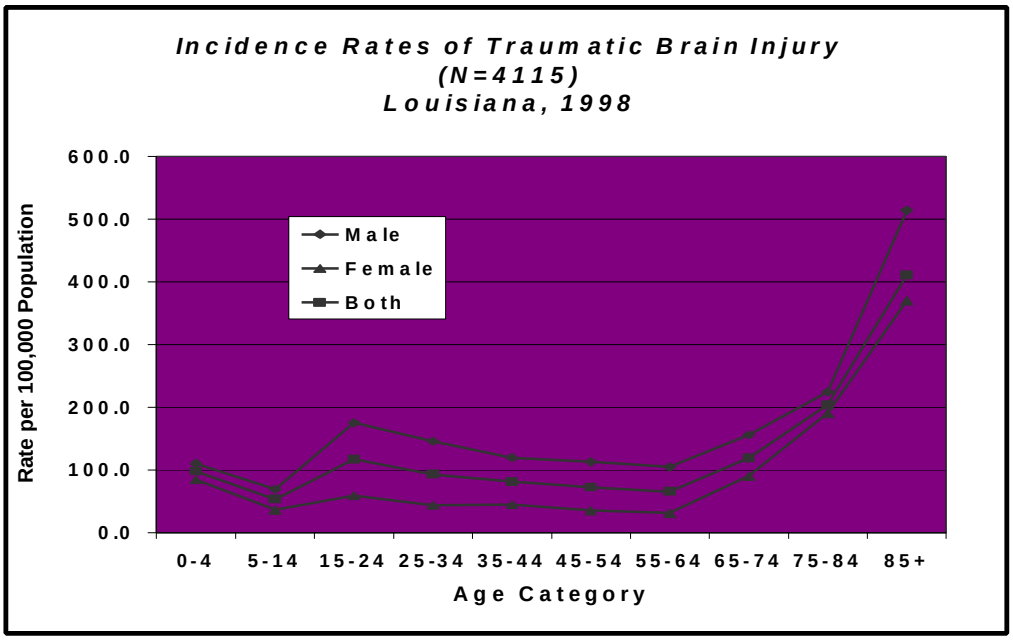
In the 1999 BRFSS, 22.4% of Louisiana adults who were surveyed reported that they had no health care coverage. While there were no disparities between rates of no health care coverage among females (23.3%) and males (21.4%), there was a clear racial difference, with Blacks (34.1%) being more likely than Whites (16.8%) to report a lack of health care coverage.

G. TRAUMATIC BRAIN INJURY

Traumatic brain injuries (TBI) are one of the most severe types of injuries in terms of both human suffering and costs to society. They are a major public health problem because of the permanence of the resulting disability, the high costs of acute and long-term treatment, and the fact that they frequently occur to young people. Traumatic brain injury is a reportable condition in Louisiana. The pie chart below highlights the importance of prevention to reduce the number of TBI. For example, seatbelt use will reduce the number of motor-vehicle-related injuries and removal of environmental hazards may reduce the number of falls. The line graph below highlights the importance of targeting those 15-24 years and 65 years and older, the two age groups with the highest incidence rates.



Source: Louisiana Office of Public Health, Injury Research and Prevention Section



Source: Louisiana Office of Public Health, Injury Research and Prevention Section